



Supplement to Annual Statistical Reports

MEDICAL SERVICES INSURANCE (MSI) Tables

12 MONTHS ENDING MARCH 31, 2002

(with comparative statistics for previous years)

PREPARED BY

HEALTH ECONOMICS

Nova Scotia Department of Health

available at: <http://www.gov.ns.ca/health/>

(February 2003)

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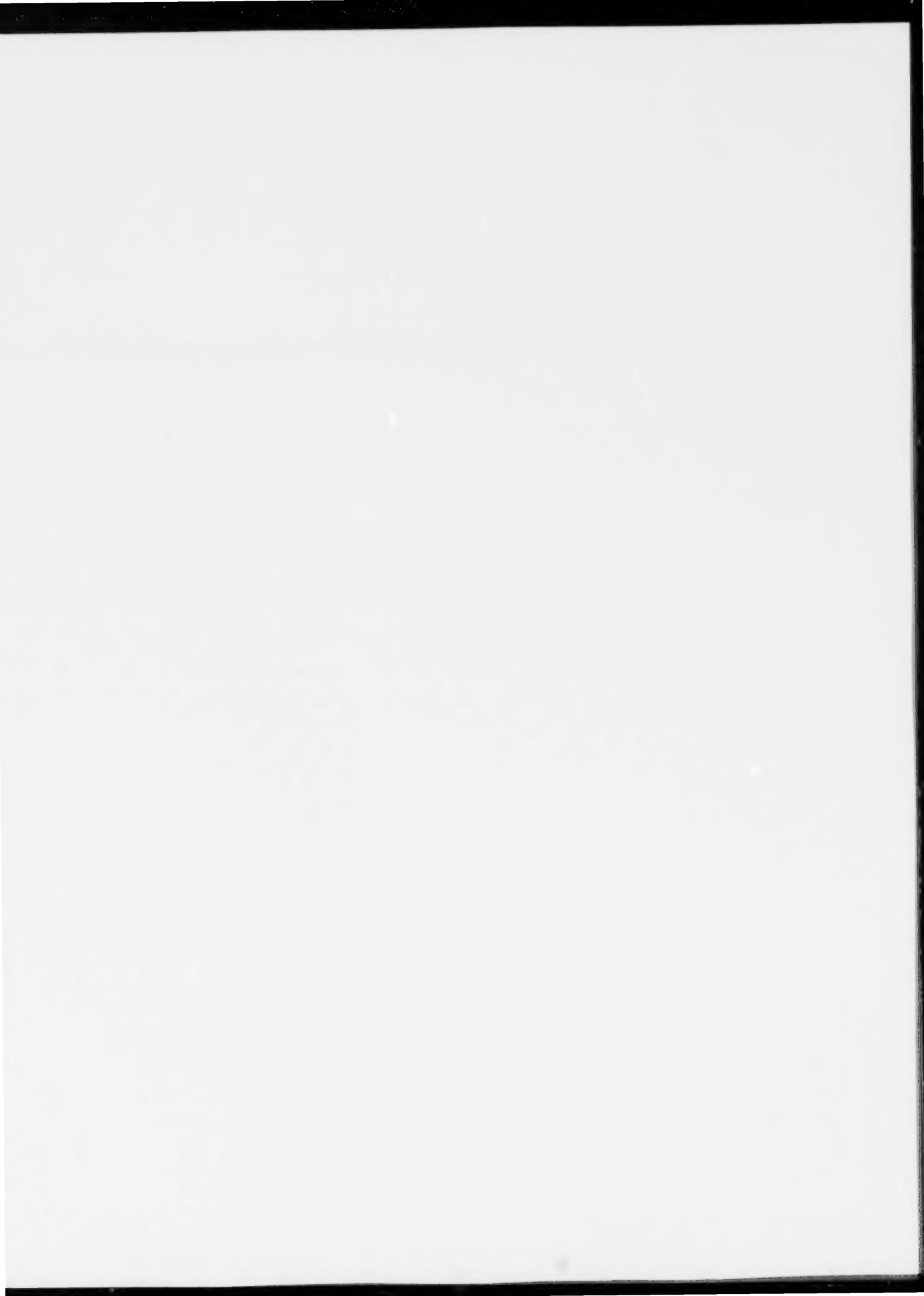
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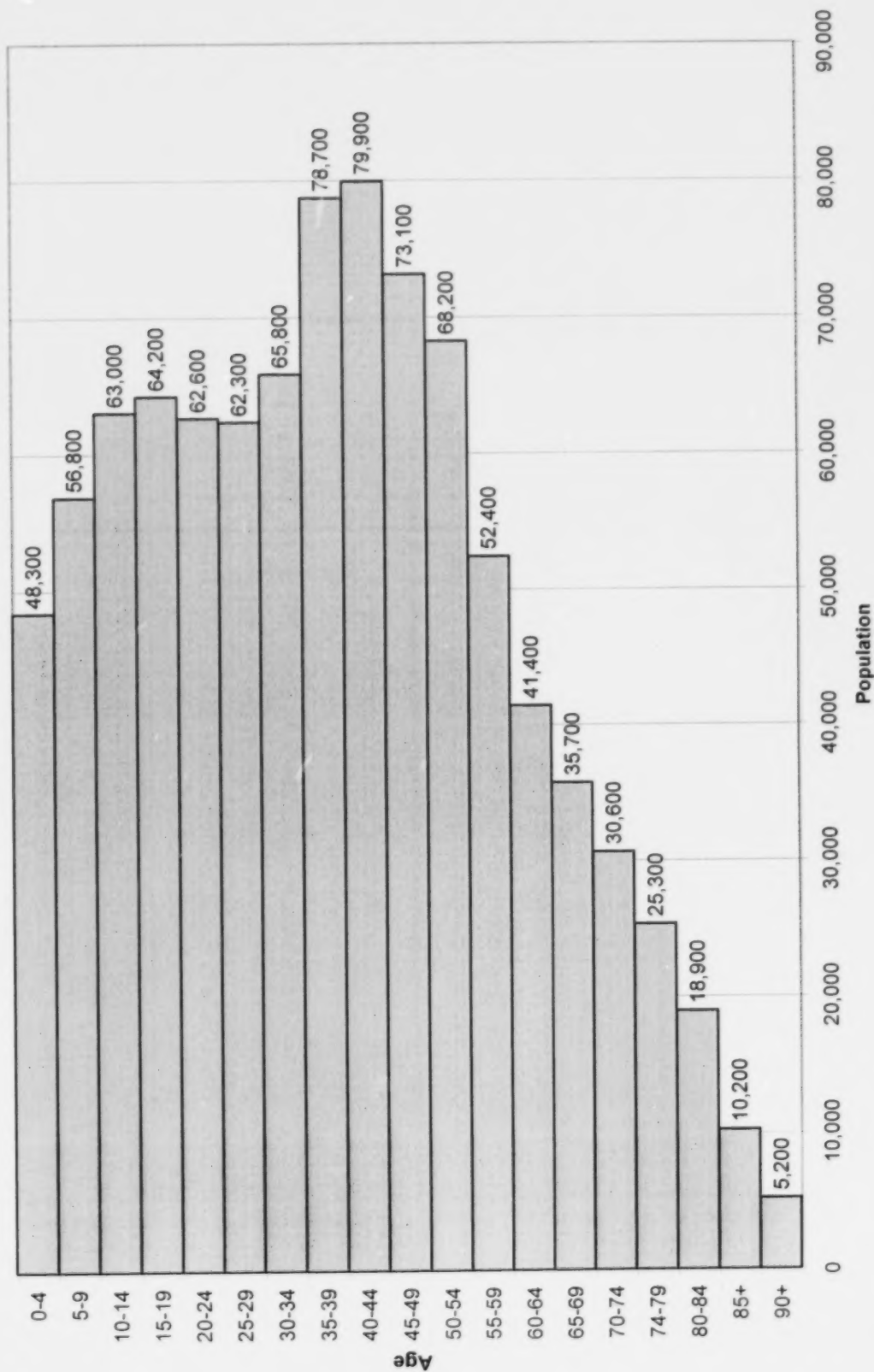
Health Economics

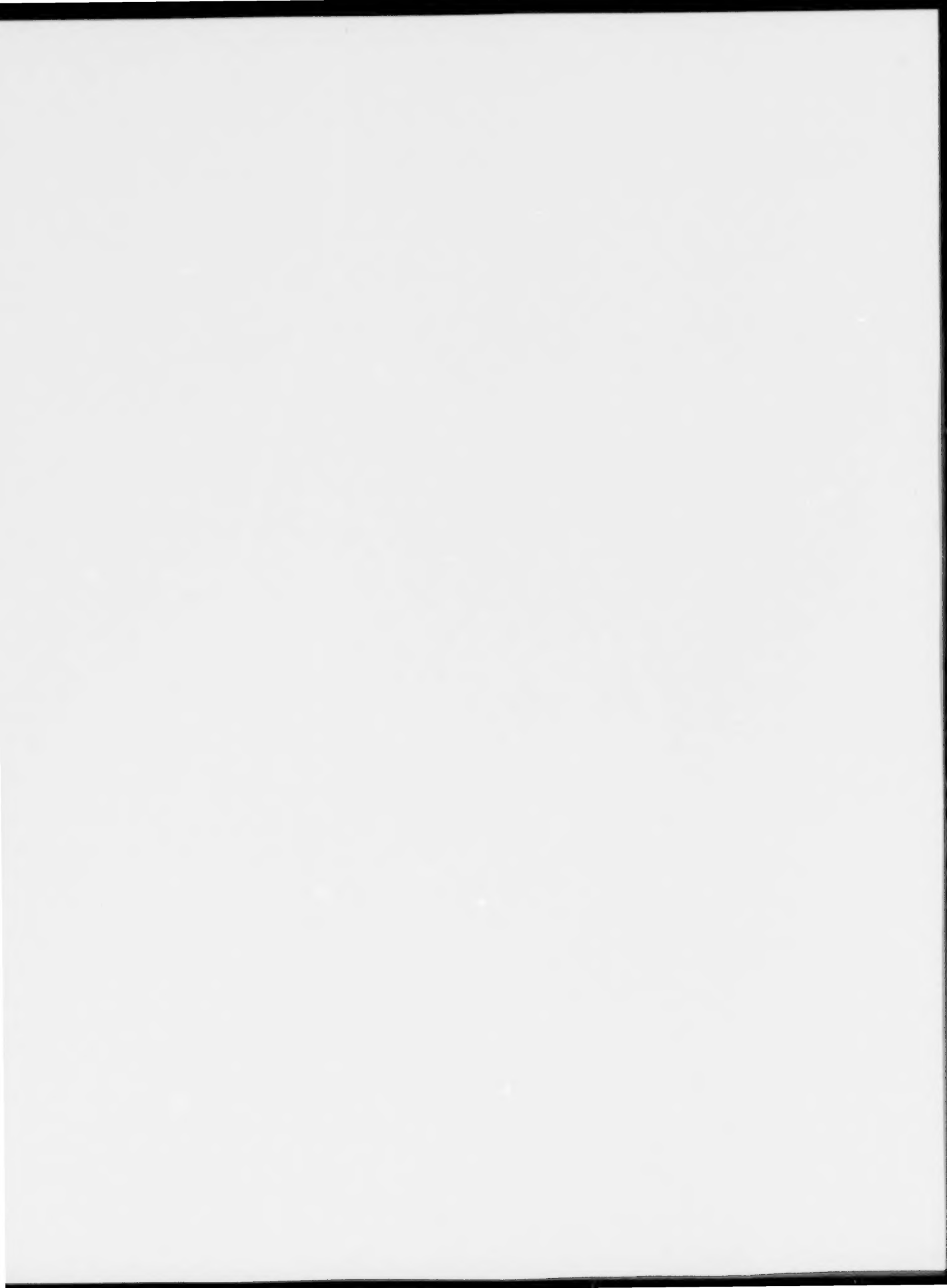
Section One

Population Data



Population By 5 Year Age Groups as of July 1, 2001





Nova Scotia Department of Health - Table 1.1

Distribution of Population¹ by Age Group
As of July 1st of each year

Age Group	Percent Change				
	1997/98	1998/99	1999/00	2000/01	2001/02
Total	934,800	934,600	939,800	941,000	942,700 ²
0 - 4	55,200	53,400	51,500	49,900	48,300
5 - 9	62,200	61,900	60,300	58,600	56,800
10 - 14	63,000	62,500	62,700	63,000	63,000
15 - 19	63,200	63,100	63,900	63,900	64,200
20 - 24	63,800	62,200	63,000	62,200	62,600
25 - 29	64,900	63,700	64,000	63,400	62,300
30 - 34	76,000	72,100	69,400	67,000	65,800
35 - 39	81,000	81,300	81,500	81,000	78,700
40 - 44	75,300	76,900	78,300	79,200	79,900
45 - 49	68,500	68,700	69,900	71,700	73,100
50 - 54	57,100	60,700	63,800	66,400	68,200
55 - 59	44,100	46,000	47,900	50,200	52,400
60 - 64	38,400	38,900	39,700	40,400	41,400
65 - 69	35,000	35,100	35,300	35,500	35,700
70 - 74	30,600	30,500	30,500	30,300	30,600
75 - 79	25,800	26,000	26,000	25,500	25,300
80 - 84	17,300	17,500	17,500	17,900	18,900
85 - 89	9,100	9,600	9,900	10,100	10,200
90+	4,300	4,500	4,700	4,800	5,200

¹ Statistics Canada population 2001 Census estimates, as of July 1st each year, include Armed Forces and RCMP personnel.

² Column does not add to total due to rounding.

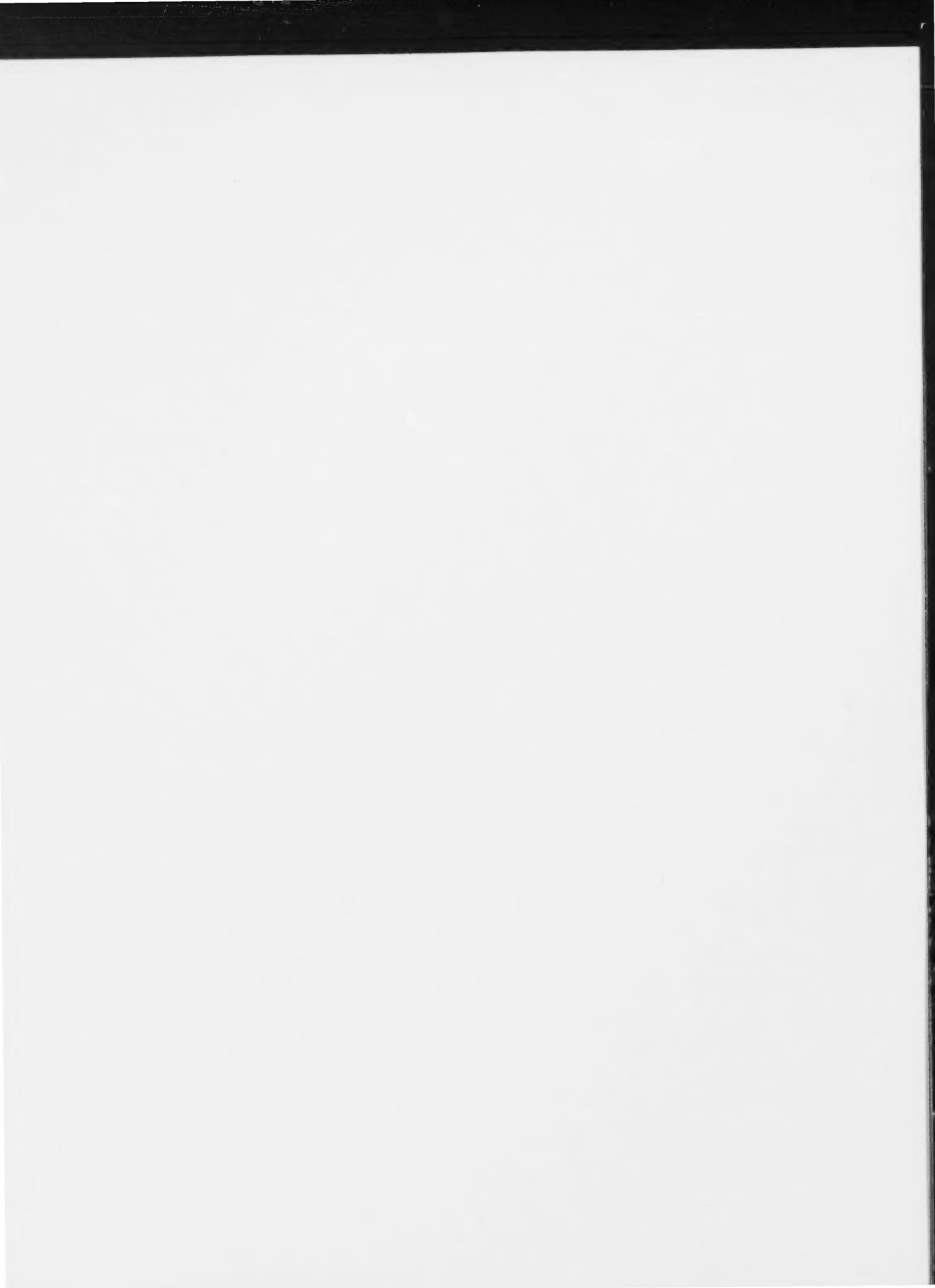




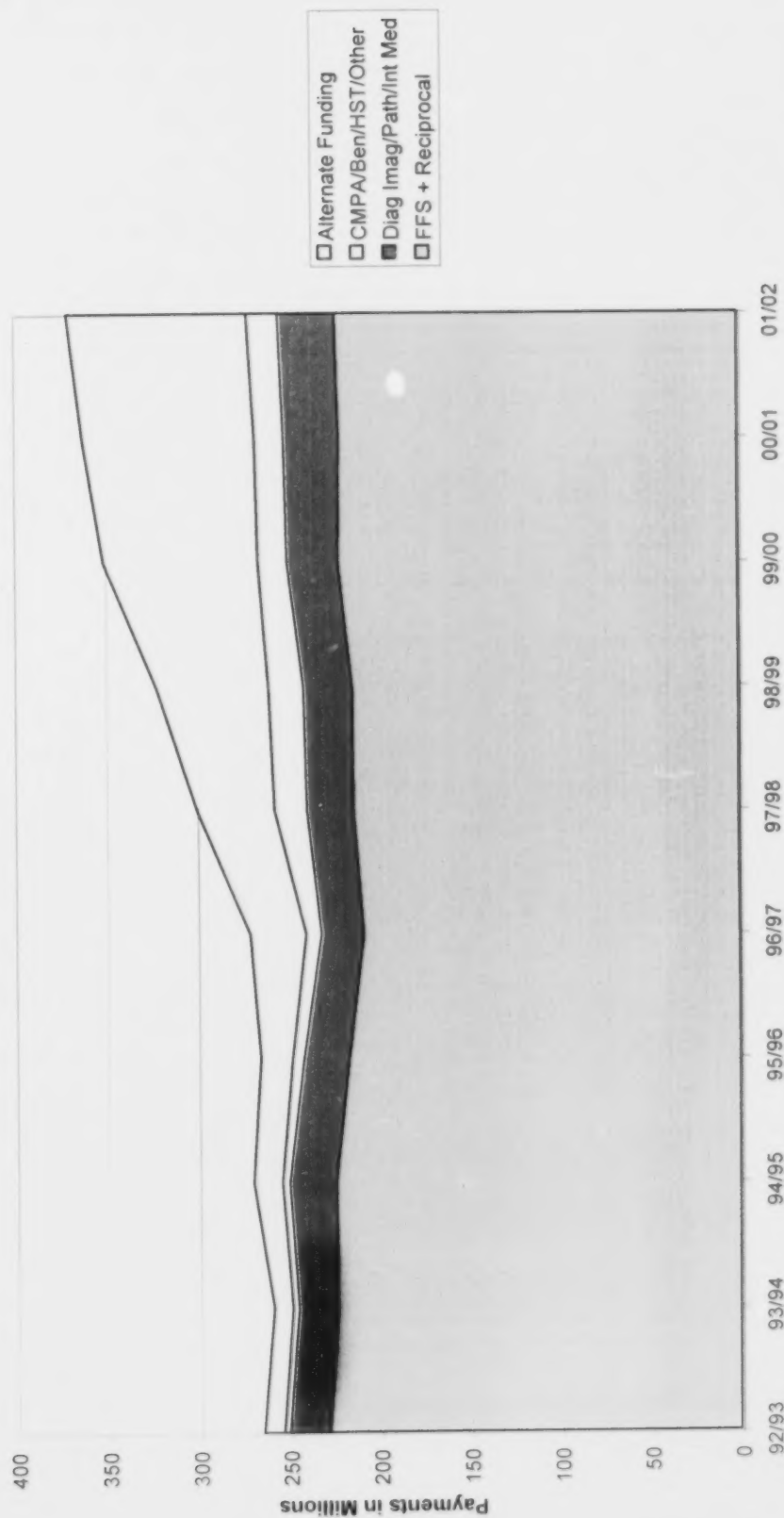
Health Economics

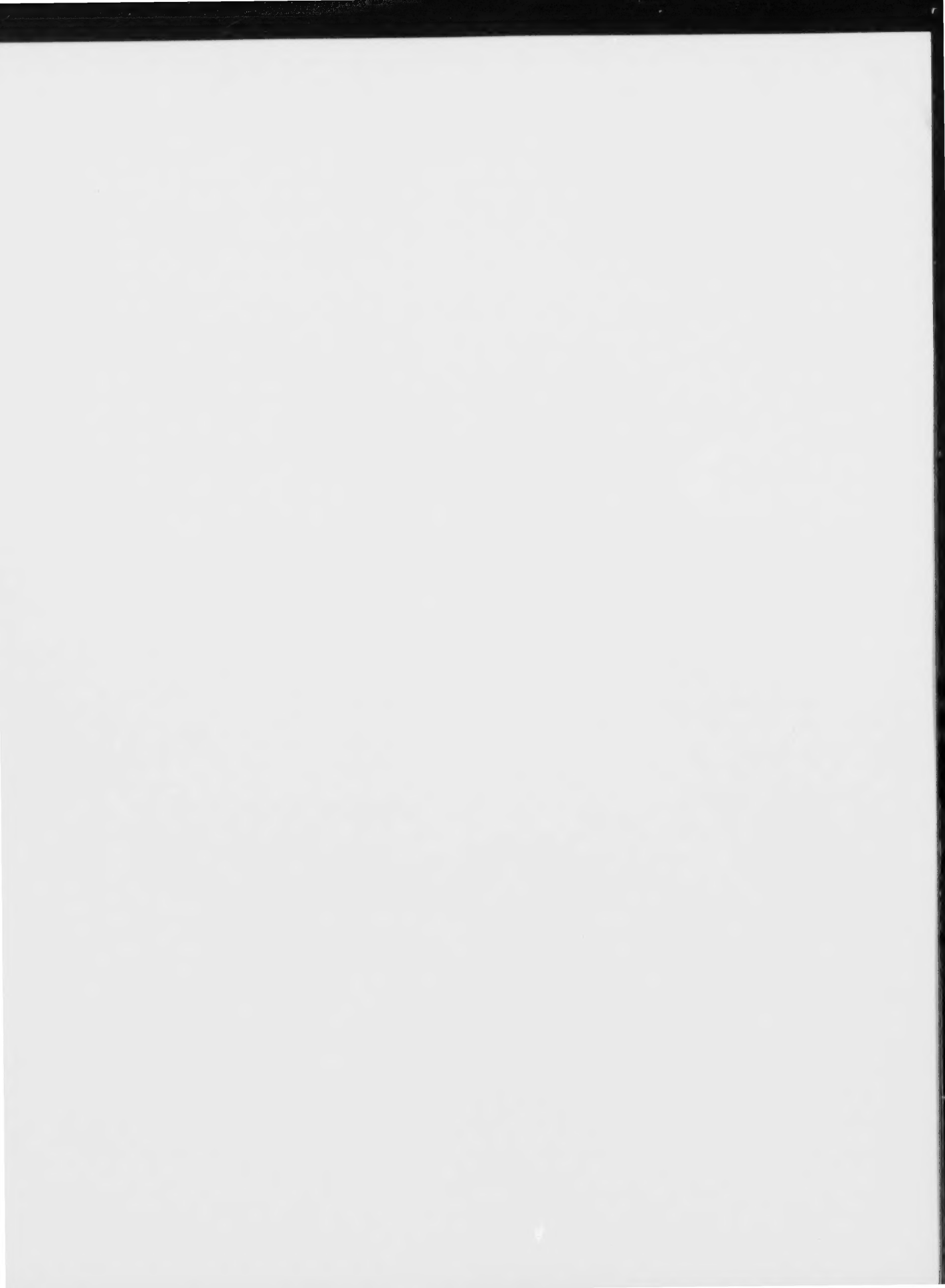
Section Two

Actual Financial Payments to Physicians

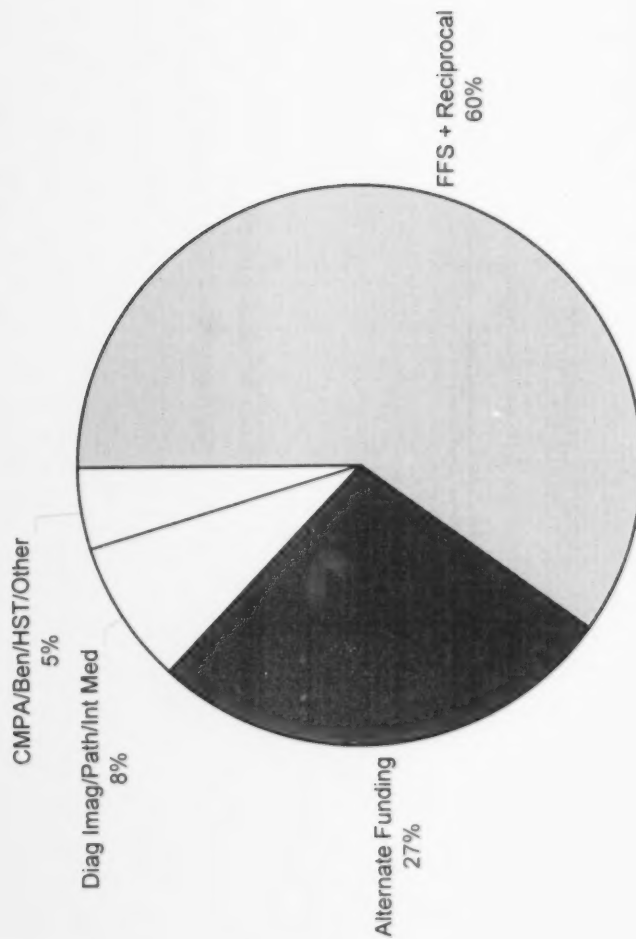


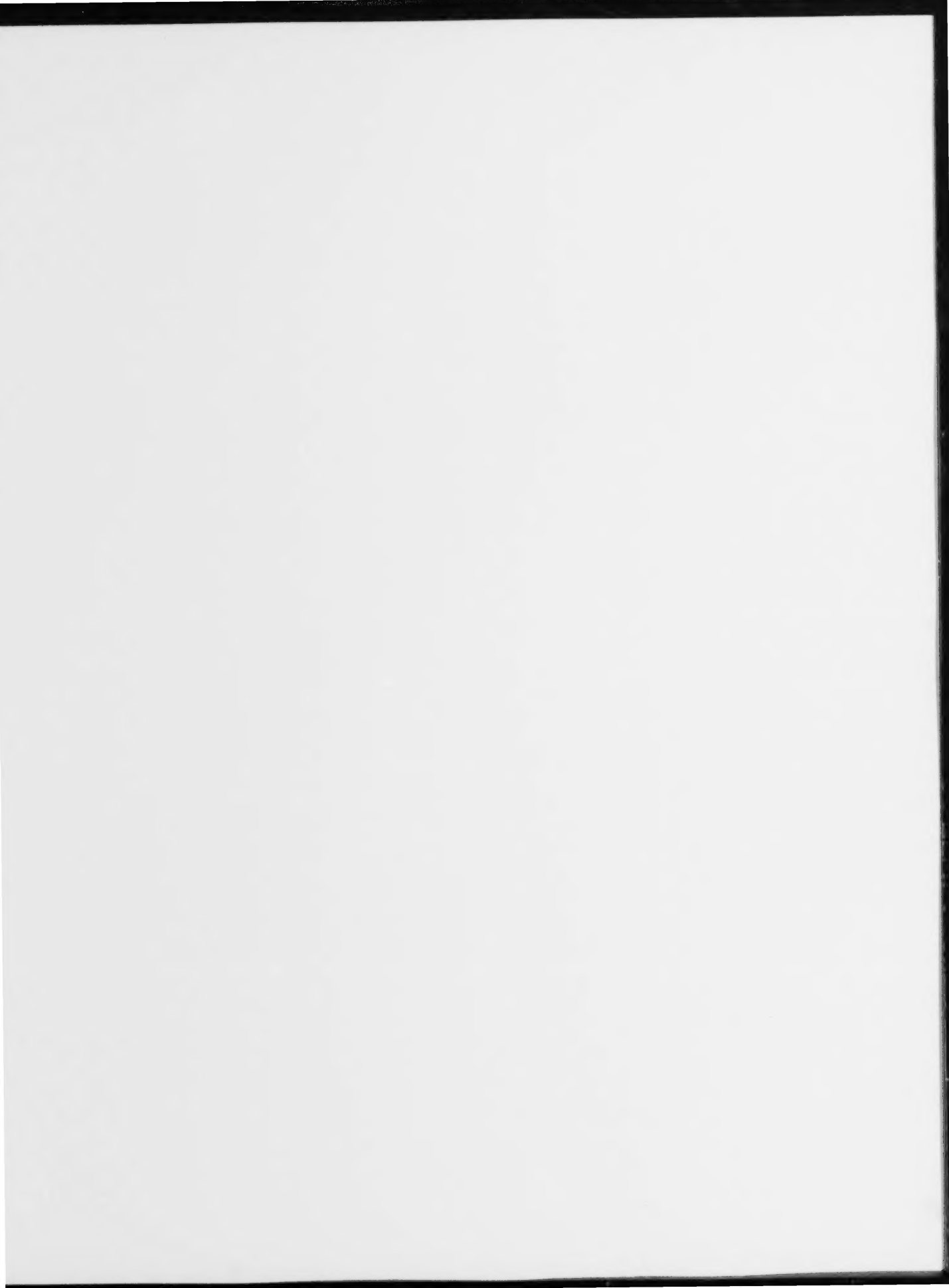
Actual Financial Payments to Physicians Nova Scotia, 1992/93 to 2001/02 (Current Dollars)





**Actual Financial Payments to Physicians by Use of Funds
Nova Scotia 2001/02 (Current Dollars)**



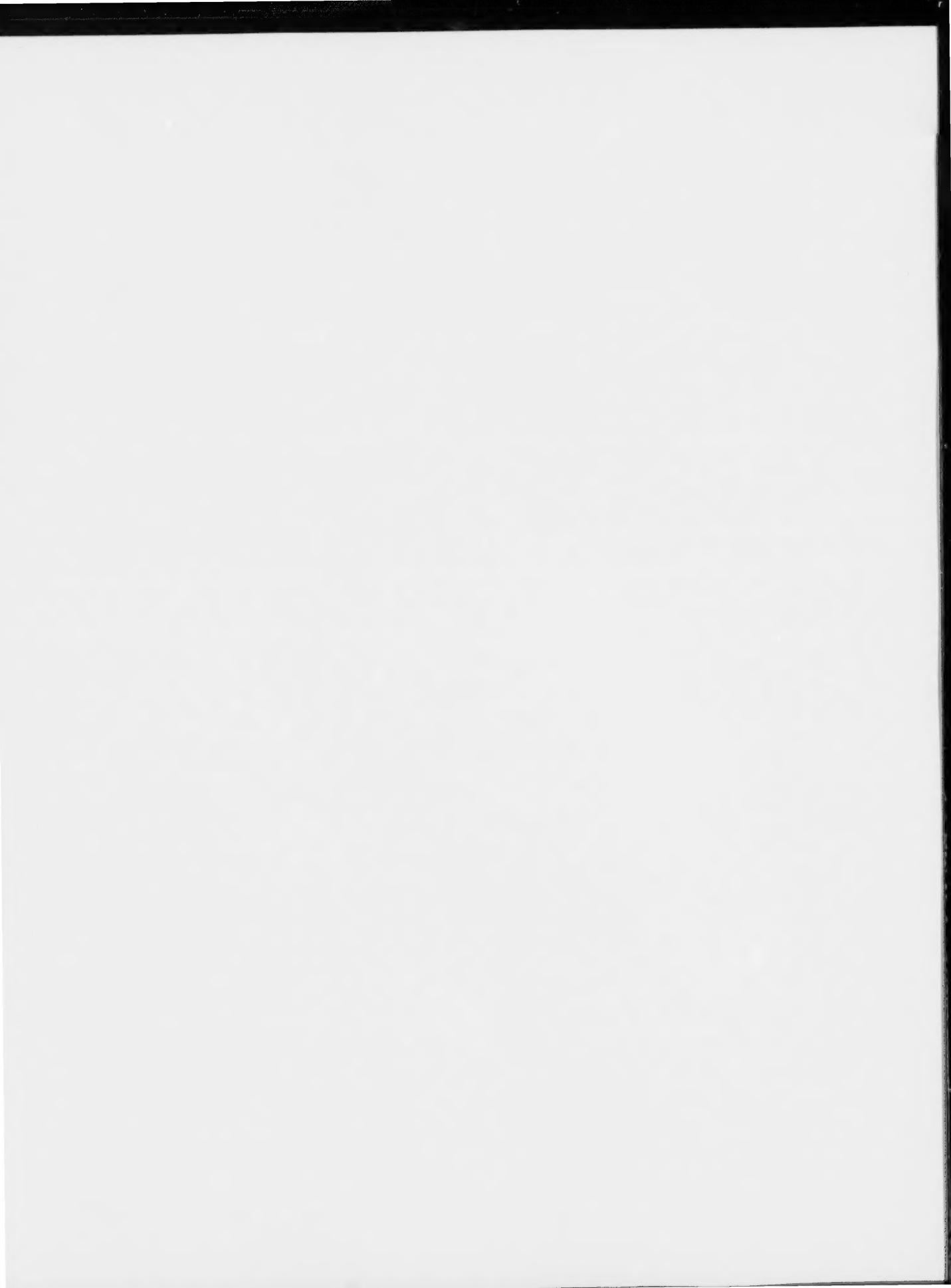


Nova Scotia Department of Health - Table 2.1

**Medical Payments
Financial Report¹**

Payment Type	Actuals 97/98	Actuals 98/99	Actuals 99/00	Actuals 00/01	Actuals 01/02	97/98	98/99	99/00	00/01	01/02
Fee for Service and Reciprocal Fee for Service Reciprocal Billing	208,524,567 4,552,672	209,637,655 4,153,879	216,781,802 4,441,830	215,643,410 4,759,750	217,549,021 4,863,633	2.3	0.5	3.4	(0.5)	0.9
Subtotal	213,077,239	213,791,534	221,223,632	220,403,160	222,412,654	2.5	0.3	3.5	(0.4)	0.9
Diag Image/Path Rad/Int Med	25,611,624	26,654,669	27,885,214	30,049,158	30,990,643	10.9	4.1	4.6	7.8	3.1
Alternate Funding	34,392,243	53,120,794	76,283,865	85,624,417	90,345,638	12.1	54.5	43.6	12.2	5.5
Alternate Funding	8,450,000	8,786,000	9,016,601	9,240,289	9,083,446		4.0	2.6	2.5	(1.7)
Subtotal	42,842,243	61,906,794	85,300,466	94,864,706	99,429,084	39.7	44.5	37.8	11.2	4.8
CMPPA, Benefits, HST and Other	3,500,000	3,621,740	2,172,897	2,114,299	3,996,105	13.6	3.5	(40.0)	(2.7)	89.0
Benefits	4,200,742	5,148,482	5,150,000	5,150,000	4,450,136	40.0	22.6	0.0	0.0	(13.6)
CMPPA	4,122,000	2,953,438	0	0	0	62.9	(28.3)	(100.0)	n/a	n/a
Managed Care Initiatives	5,933,057	6,745,071	7,052,297	7,392,978	7,471,404		13.7	4.6	4.8	1.1
HST Rebate	35,054	47,263	74,939	(4,747)	14,315		34.8	58.6	(106.3)	(401.6)
Consultant's Fund		671,661	1,365,366	1,477,859	1,120,577			103.3	8.2	(24.2)
Reentry Program		138,500	138,500	34,625	0			0.0	(75.0)	(100.0)
NS CME Community Network										
Subtotal	17,790,853	19,326,155	15,953,999	16,165,014	17,052,537	106.6	8.6	(17.4)	1.3	5.5
Grand Total	299,321,959	321,679,152	350,363,311	361,482,038	369,884,918	10.8	7.5	8.9	3.2	2.3

¹ Data provided are Financial Payments with accruals and associated adjustments. There are differences between the Financial Payments shown and the total payments shown in the Statistical Tables. The differences are due to accounting adjustments for accruals, certain recoveries, and retroactive payments.

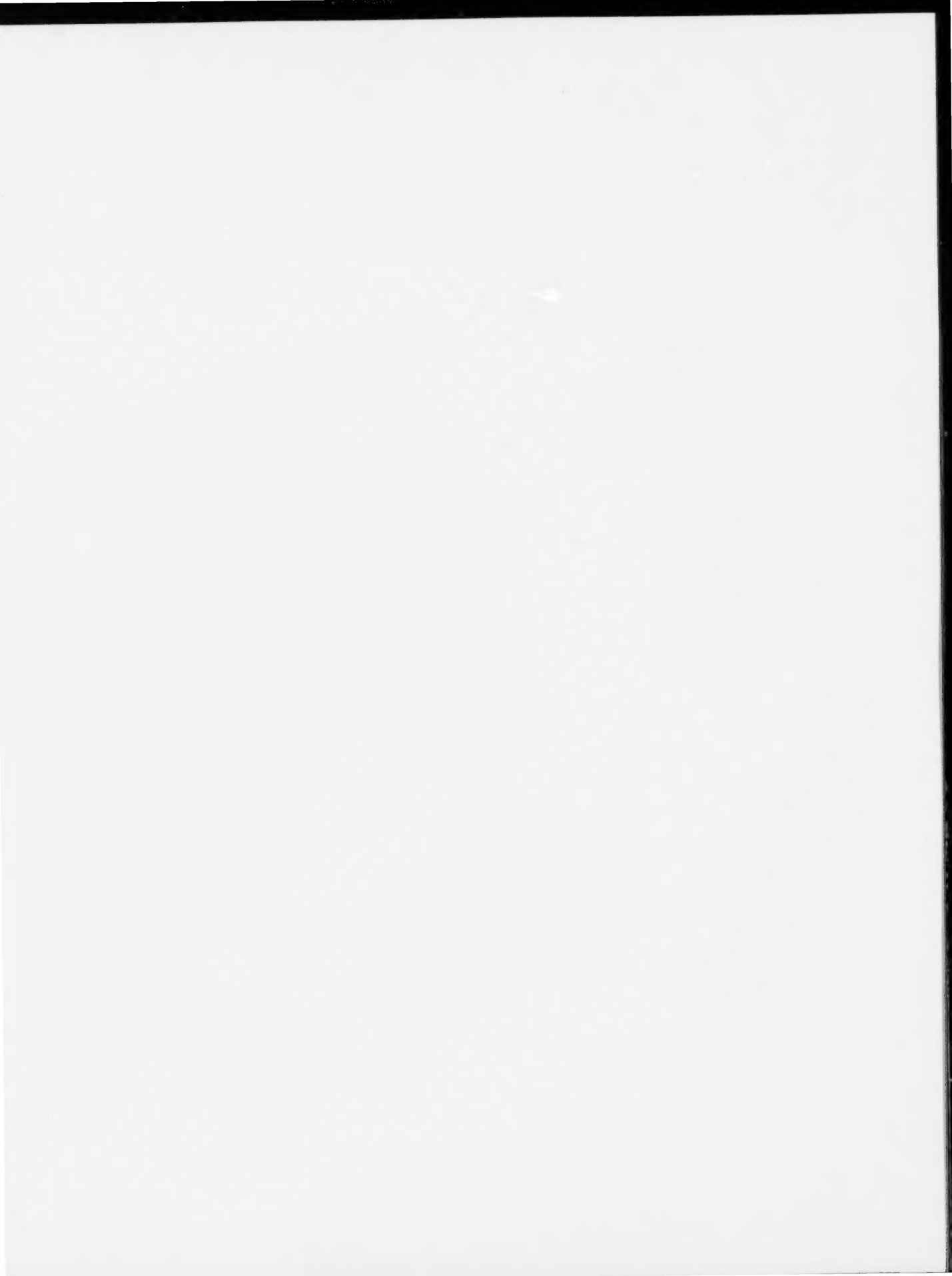




Health Economics

Section Two

Actual Financial Payments to Physicians



Nova Scotia Department of Health - Table 3.1

Summary of Payments¹

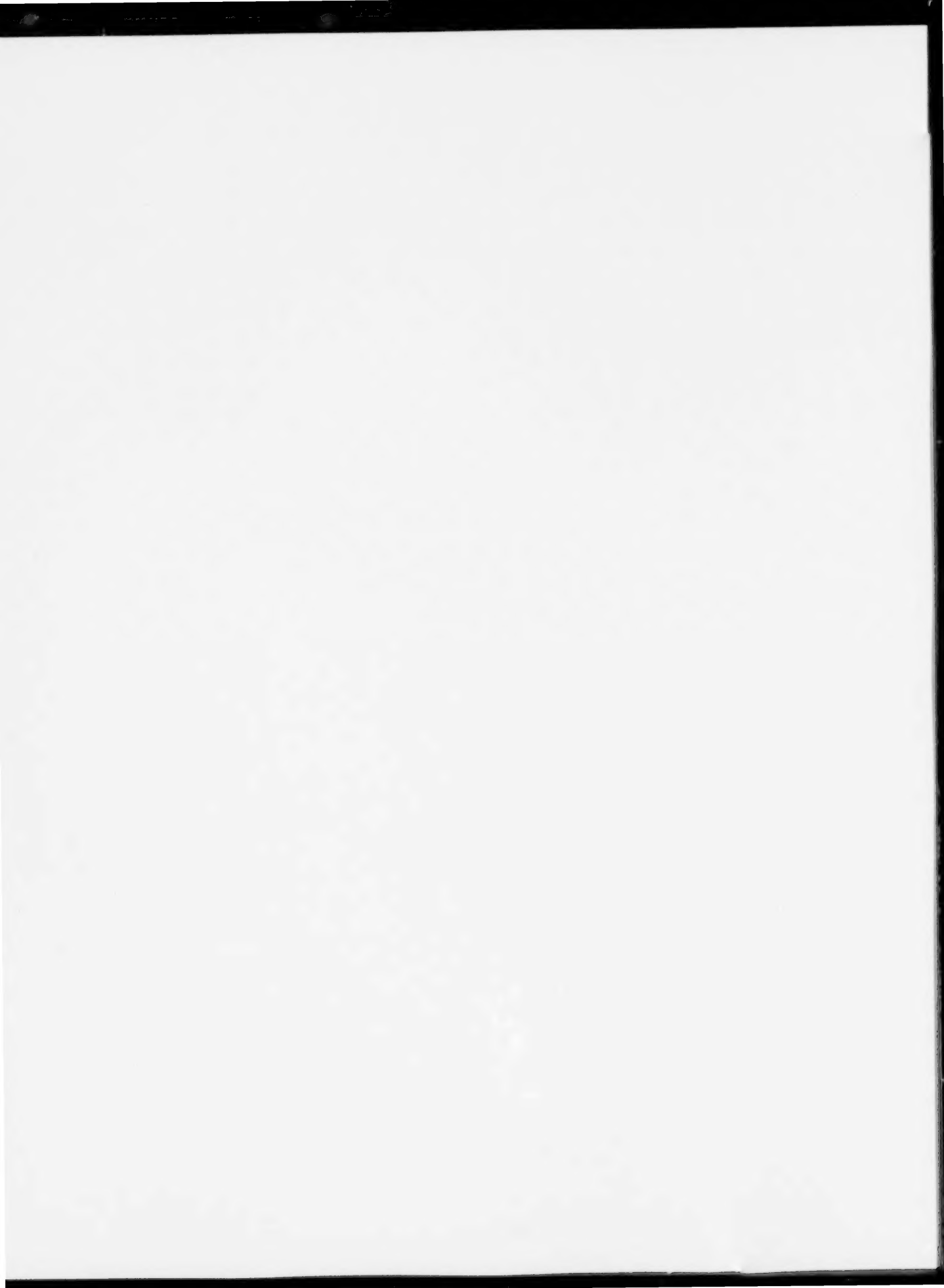
	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change				
						1997/98	1998/99	1999/00	2000/01	2001/02
Total	393,907,089	431,200,417	467,887,282	480,209,671	503,382,442	7.9	9.5	8.5	2.6	4.8
Physicians' Services ²	292,863,898	317,643,393	350,177,455	361,507,881	376,020,534	9.5	8.5	10.2	3.2	4.0
Dental Services	8,207,374	9,748,680	10,102,628	8,721,579	8,909,087	-19.3	18.8	3.6	-13.7	2.1
Optometric Services	1,481,107	1,740,978	1,869,203	2,071,465	2,180,898	-18.6	17.5	7.4	10.8	5.3
Prescription Drugs ³	90,589,242	101,046,160	104,852,982	107,083,599	115,212,910	6.8	11.5	3.8	2.1	7.6
Prosthetic Services	765,468	1,021,206	885,014	825,147	1,059,012	-12.5	33.4	-13.3	-6.8	28.3

¹ Data are 'date of service' except Dental. Dental date of service data began in 1999/00.

² Includes CMPA, Benefit Fund, Rural Stabilization, Emergency Room III, and miscellaneous accounting adjustments.

³ MSI Pharmacare includes Professional Fee, Drug Cost, Upcharge, and Special Funding Assistance Programs. This represents the total expenditure for the Pharmacare programs, not only the Department of Health expenditure.

⁴ Includes miscellaneous accounting adjustments.

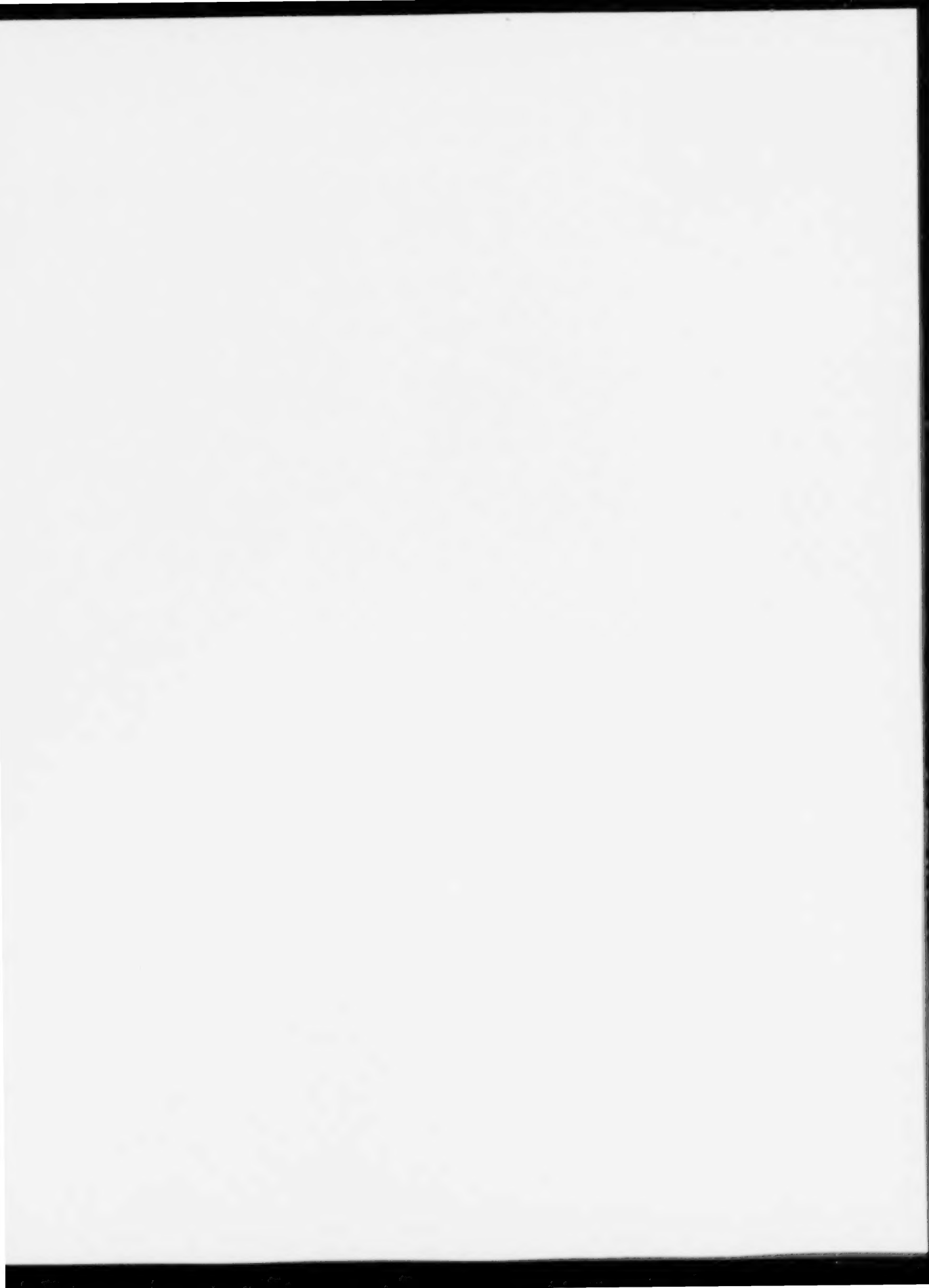




Health Economics

Section Four

Physicians' Services



Nova Scotia Department of Health - Table 4.1

Physicians' Services'
Payment Summary by Date of Service

Payment Summary	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
Fee-for-Service								
NS Resident, NS Physician	207,695,808	210,496,326	218,275,145	221,321,154	226,211,130	1.3	3.7	1.4
NS Resident, Non NS Physician	4,456,225	4,739,355	4,914,892	4,868,326	5,302,545	6.4	3.7	(1.2)
Total Fee-for-Service	212,152,033	215,235,681	223,190,037	226,179,480	231,513,675	1.5	3.7	1.3
Alternate Funding								
Fixed Periodic Payment - Individual	6,336,113	5,954,323	7,979,754	9,618,293	10,112,059	(6.0)	34.0	20.5
Fixed Periodic Payment - Group	8,685,885	18,765,974	38,898,445	42,824,746	47,548,632	116.1	107.3	10.1
Sessional	1,243,813	1,064,670	1,477,800	1,511,433	1,529,176	(14.4)	38.8	2.3
Psychiatric	12,998,286	13,774,760	13,835,010	13,563,876	14,234,318	6.0	0.4	(2.0)
Emergency Room Levels 1 & 2	8,979,692	11,819,432	13,105,276	13,652,411	14,012,036	31.6	10.9	4.2
Emerg. Room Lvl 3 & 4 & Remote On Call	8,172,354	9,190,775	9,004,996	9,293,404	9,396,459	12.5	(2.0)	3.2
Total Alternate Funding	46,416,143	60,569,934	84,301,280	90,464,164	96,832,680	30.5	39.2	7.3
Non Patient Specific (NPS)								
Diagnostic Imaging	18,525,579	19,608,793	21,497,994	23,254,466	24,271,077	5.8	9.6	8.2
Pathology	3,203,783	3,499,036	3,680,837	3,762,044	3,974,337	9.2	5.2	2.2
Internal Medicine	3,597,719	3,738,754	2,641,838	2,831,019	3,070,633	3.9	(29.3)	7.2
Retro Payment					170,400			
Total Non Patient Specific	25,327,082	26,846,583	27,820,670	29,847,529	31,486,447	6.0	3.6	7.3
Other Payments								
HST	5,588,614	6,382,145	7,004,081	7,345,817	7,478,627	14.2	9.7	4.9
Benefit Fund	3,400,000	3,621,740	2,172,897	2,114,299	3,996,105	6.5	(40.0)	(2.7)
CMIPA	4,200,742	5,148,482	5,150,000	5,150,000	4,450,136	22.6	0.0	0.0
Miscellaneous Adjustments	(4,174,155)	535,119	538,490	406,592	262,864	112.8	0.6	(24.5)
Total Other Payments	9,015,201	15,687,486	14,865,468	15,016,709	16,187,732	74.0	(5.2)	1.0
Total Physician Payments	292,910,458	318,339,684	350,177,455	361,507,881	376,020,534	8.7	10.0	3.2

' Data provided are 'date of service'.

**Total Payments¹ for Physicians' Services²
and Expenditure Per Insured Person³
Fiscal Years 1992/93 to 2001/02**

Year	Total Paid	Expenditure per Insured Person	Percentage Change from Previous Year
2001/02 ⁴	376,020,534	398.88	3.8
2000/01 ⁴	361,507,881	384.17	3.1
1999/00 ⁴	350,177,455	372.61	9.4
1998/99 ⁴	318,339,684	340.62	8.7
1997/98 ⁴	292,910,458	313.34	9.3
1996/97 ³	267,449,785	286.81	0.4
1995/96 ³	262,979,889	285.69	0.3
1994/95	262,405,345	284.73	2.9
1993/94	252,050,274	276.73	3.9
1992/93	238,653,399	266.38	(2.4)

¹ Data provided are 'date of payment' before 1997/98; 1997/98 to date are 'date of service'.

² Includes physicians' services payments for Salaried/Sessional. Diagnostic Imaging and Internal Medicine were included as of April 1, 1993. Pathology was included effective June 1993.

³ Includes CMPA and Benefit Fund.

⁴ Includes CMPA, Benefit Fund, Rural Stabilization, Emergency Room Level III and miscellaneous accounting adjustments.

Nova Scotia Department of Health - Table 4.3

**Physicians' Services¹
Number of Physicians Paid²
Fiscal Years 1999/00 to 2001/02**

Payment Category	Number of Physicians			Percent Change	
	1999/00 ⁴	2000/01 ⁴	2001/02	2000/01	2001/02
Fee-for Service payments only	749	752	716	0.4	-4.8
Physicians receiving types of Alternate Funding ³	377	407	423	8.0	3.9
Fee-for Service with other combinations of payment types	805	829	864	3.0	4.2
Total Physicians receiving Payments	1,931	1,988	2,003	3.0	0.8

¹ Data provided are 'date of service'.

² Includes physicians with a Fee-for-Service payment => \$1.00 and physicians from Alternate Funded Groups.

³ Alternate Funded Groups includes Group Block Funded, Salary, Emergency Room physicians, Remote On Call, Salary, Sessional, Psychiatry and NonPatient Specific.

⁴ Corrected data

Utilization Summary of Physicians' Services¹ by Date of Service

Fiscal Years 1997/98 - 2001/02

Utilization Summary	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
						98/99	99/00	00/01 01/02
Total Payments for Physicians' Services	292,863,898	317,643,393	350,177,455	361,507,881	376,020,534	8.5	10.2	3.2 4.0
Total Services ²	8,386,447	8,486,514	8,860,045	8,839,088	8,913,220	1.2	4.4	(0.2) 0.8
Insured Population ³	934,800	934,600	939,800	941,000	942,700	(0.0)	0.6	0.1 0.2
Total Persons Registered by MSI ⁴	933,345	937,619	944,519	948,369	950,525	0.5	0.7	0.4 0.2
Services per Insured	9.0	9.1	9.4	9.4	9.5	1.2	3.8	(0.4) 0.7
Expenditure per Insured	313.29	339.87	372.61	384.17	398.88	8.5	9.6	3.1 3.8
Total Beneficiaries ⁵ receiving Insured Services	788,619	788,780	791,288	792,702	788,690	0.0	0.3	0.2 (0.5)
Percent of Beneficiaries ⁵ to Insured Population	84.4	84.4	84.2	84.2	83.7	0.0	(0.2)	0.1 (0.7)
Services per Beneficiary ⁵	8.68	8.73	9.09	9.04	9.11	0.6	4.1	(0.6) 0.8
Expenditure per Beneficiary ⁵	339.25	368.67	407.38	418.09	436.84	8.7	10.5	2.6 4.5

¹ Data provided are 'date of service'.² Includes Fee-for-Service, Shadow Services, Pay Patient Services, and Non Patient Specific in patient and outpatient services.³ Insured Population from Statistics Canada's population data as of July 1st each year.⁴ A person who is eligible for public funded health services provided by the province of Nova Scotia.⁵ Excludes Non-Patient Specific (Diagnostic Imaging, Pathology, Internal Medicine) beneficiaries and payments as these claims are submitted in bulk; no demographic data are available.

Nova Scotia Department of Health - Table 4.5

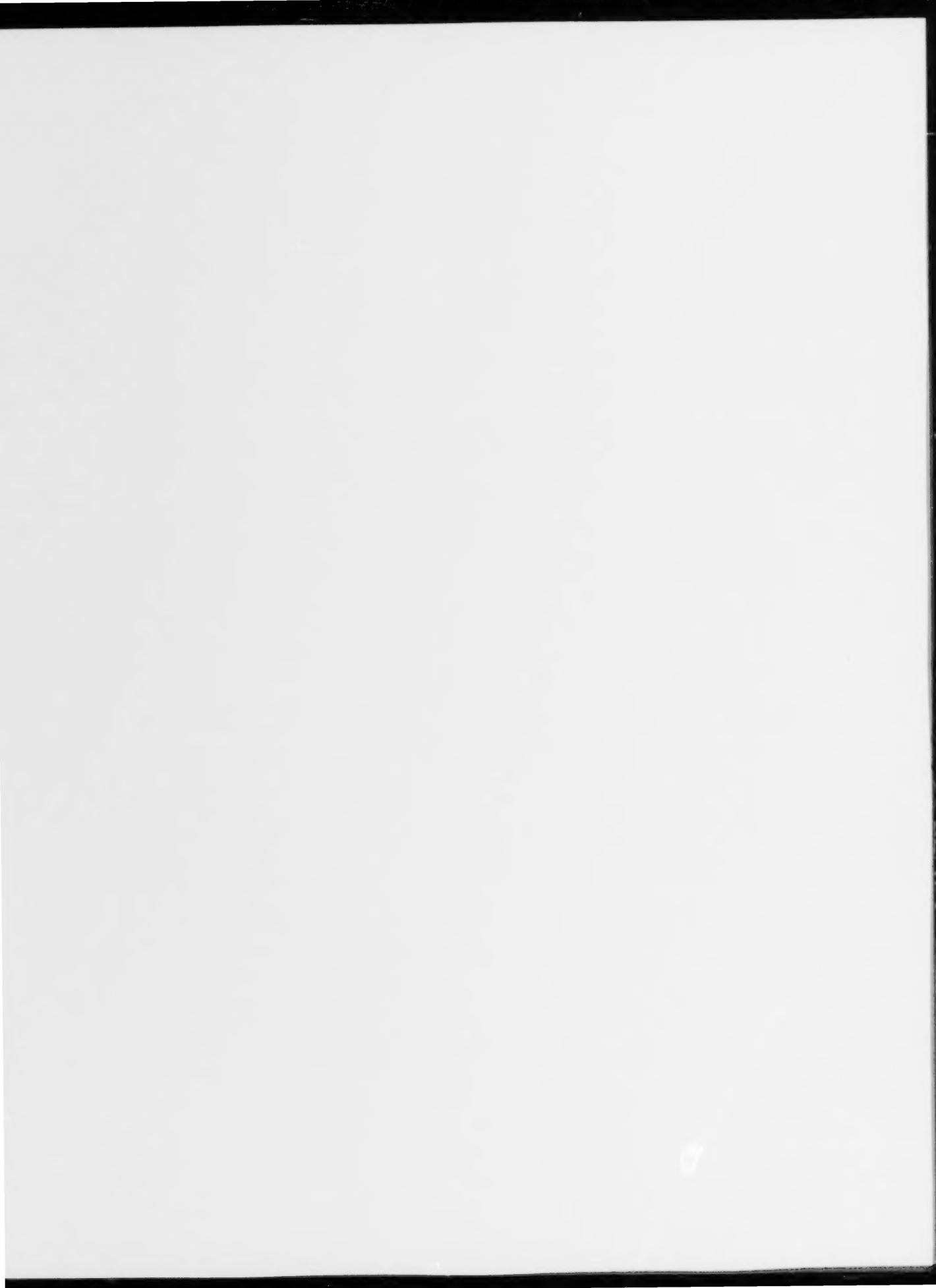
**Physicians' Services¹
by Date of Service
Fiscal Years 1997/98 - 2001/02**

	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
Fee-for-Service	6,298,454	6,128,890	6,225,939	6,153,904	6,175,672	(2.7)	1.6	(1.2)
Shadow Services	539,424	750,086	961,739	1,003,145	1,001,188	39.1	28.2	4.3
Pay Patient Services ²	7,141	8,227	7,172	6,186	6,238	15.2	(12.8)	(13.7)
Non Patient Specific ³								
- Inpatient	531,402	524,034	533,066	519,419	421,415	(1.4)	1.7	(2.6)
- Outpatient	1,010,026	1,075,277	1,132,129	1,156,434	1,308,707	6.5	5.3	2.1
Total	8,386,447	8,486,514	8,860,045	8,839,088	8,913,220	1.2	4.4	(0.2)

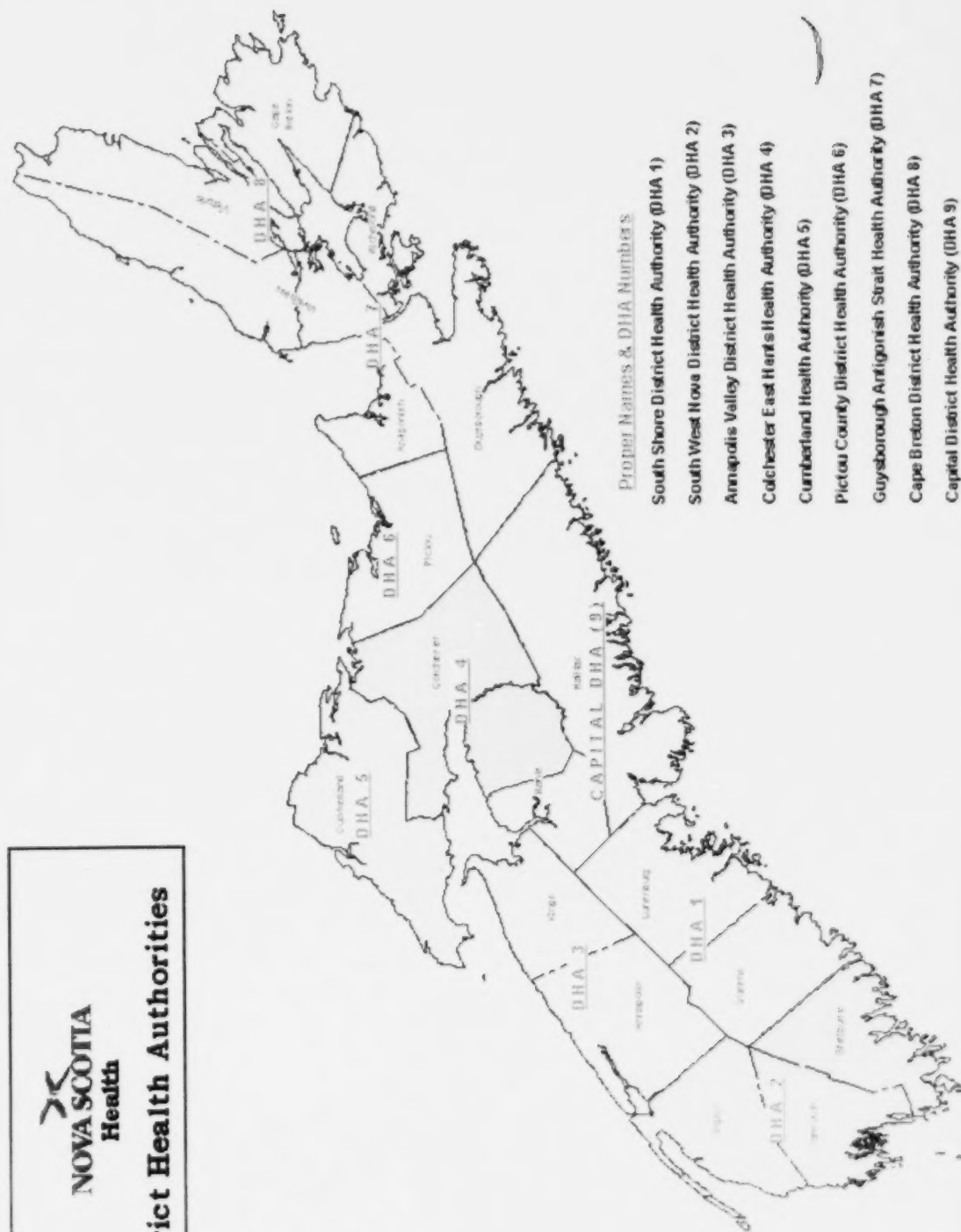
¹ Excludes services for N.S. residents who were attended by a physician during a stay in a province or territory having a reciprocal agreement with N.S. The reciprocal agreement excludes the Province of Quebec and other Countries.

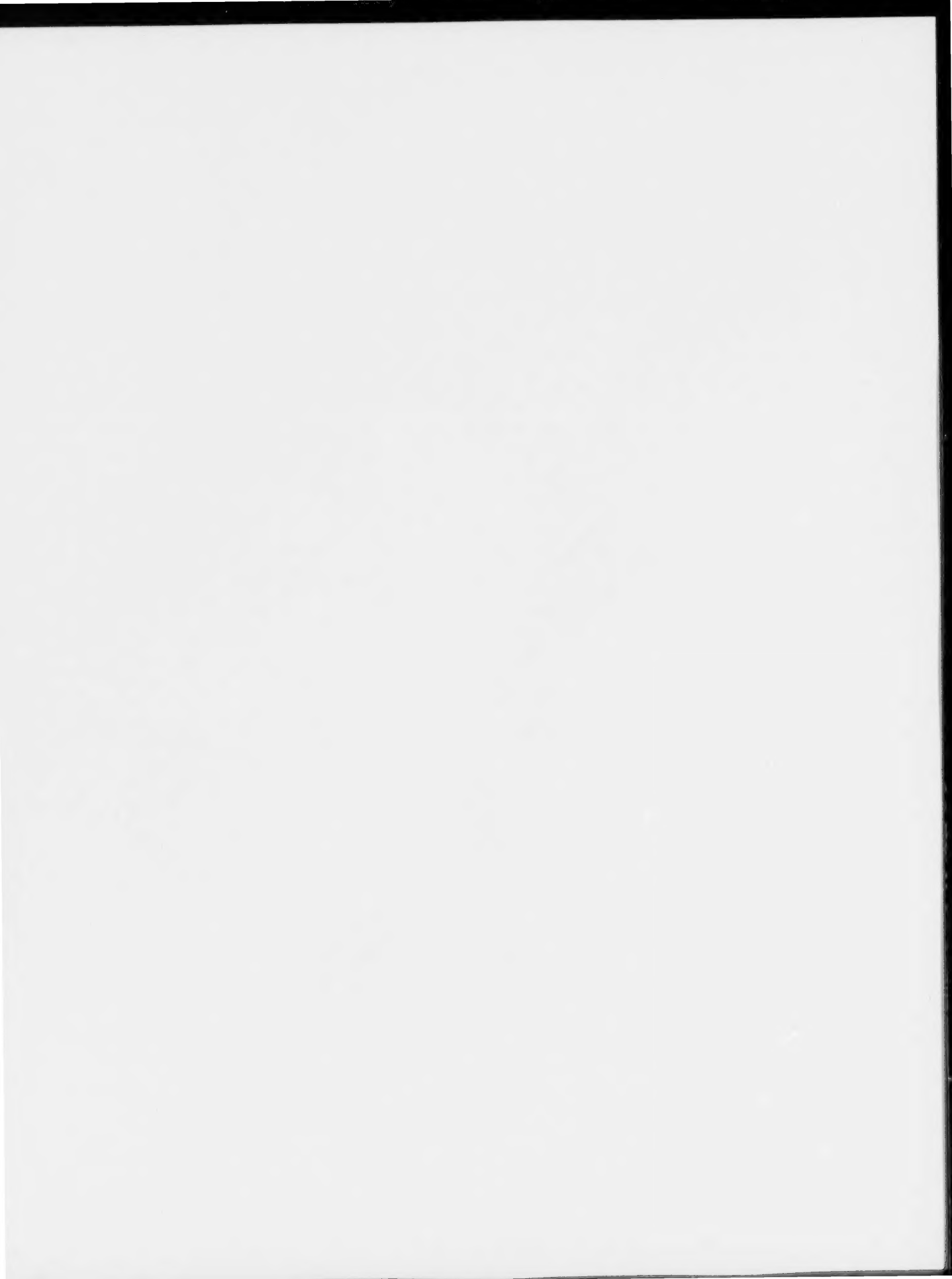
² Includes services for N.S. residents Out-of-County and in Quebec.

³ Diagnostic Imaging, Pathology, and Internal Medicine.



Nova Scotia Department of Health – Figure 4





Nova Scotia Department of Health - Table 4.6

**Physicians¹ Gross Payments
District Health Authority by Date of Service
Fiscal Years 1998/99 - 2001/02**

District Health Authority	1998/99 ²			1999/00 ²			2000/01 ²			2001/02		
	No. of Physicians	Amount Paid	Average Paid Per Physician	No. of Physicians	Amount Paid	Average Paid Per Physician	No. of Physicians	Amount Paid	Average Paid Per Physician	No. of Physicians	Amount Paid	Average Paid Per Physician
1 - South Shore	85	13,907,215	163,614	92	16,149,254	175,535	90	17,447,615	193,862	91	18,159,982	199,560
2 - South West Nova	78	14,723,662	188,765	81	16,191,651	199,897	80	16,344,018	204,300	79	16,579,630	209,869
3 - Annapolis Valley	137	22,909,596	167,223	131	25,687,210	196,086	132	26,032,511	197,216	136	26,703,748	196,351
4 - Colchester East Hants	91	15,571,433	171,115	95	17,377,342	182,919	89	17,386,598	195,378	92	18,044,449	196,135
5 - Cumberland	45	6,262,521	139,167	45	7,533,075	167,402	50	7,481,301	149,626	53	7,965,939	150,301
6 - Pictou County	75	12,465,416	166,206	67	12,767,362	190,558	63	13,617,618	216,153	71	13,196,000	185,859
7 - Guysborough Antigonish Strait	68	13,065,759	192,144	72	15,249,015	211,792	70	15,111,836	215,883	76	16,860,698	221,851
8 - Cape Breton	221	40,729,583	184,297	216	45,576,870	211,004	235	46,807,868	199,182	232	47,756,449	205,847
9 - Capital	1,009	161,337,074	159,898	1,089	173,192,499	159,038	1,103	181,221,264	164,299	1,119	190,098,395	169,882
Other	24	1,457,471	60,728	43	3,579,503	83,244	75	4,145,914	55,279	54	1,337,056	24,760
Total	1,833	302,429,731	164,992	1,931	333,303,782	172,607	1,987	345,598,543	173,930	2,003	356,702,347	178,084

¹ Includes Fee-for-Service, Fixed Periodic Payments/Sessional, Pathology/Radiology/Internal Medicine Contracts, ER3 payments and Alternate Block Funded groups.

² Includes actual ER3 payments made to the hospitals. This total will not balance with Table 4.7 as Table 4.7 requires individual physician information which was not available for some alternate funded arrangements.

District Health Authority Distribution of Gross Payments¹ by Functional Specialty
Fiscal Year April 1, 2001 - March 31, 2002

District Health Authority	General Practice ²			Specialists ³			Total		
	No. of Physicians	Payments	Average Per Physician	No. of Physicians	Payments	Average Per Physician	No. of Physicians	Payments	Average Per Physician
1 - South Shore	55	9,238,055	167,965	36	8,240,003	228,889	91	17,478,058	192,067
2 - South West Nova	45	8,506,052	189,023	34	7,396,815	217,553	79	15,902,867	201,302
3 - Annapolis Valley	68	11,231,882	165,175	68	14,630,702	215,157	136	25,862,584	190,166
4 - Colchester East Hants	55	8,466,825	153,942	37	8,640,935	233,539	92	17,107,760	185,954
5 - Cumberland	35	5,159,426	147,412	18	2,124,590	118,033	53	7,284,016	137,434
6 - Pictou County	35	5,787,732	165,364	36	6,586,394	182,955	71	12,374,126	174,283
7 - Guysborough Antigonish Strait	40	8,164,725	204,118	36	8,015,126	222,642	76	16,179,851	212,893
8 - Cape Breton	113	18,782,734	166,219	119	27,414,517	230,374	232	46,197,251	199,126
9 - Capital	382	49,295,102	129,045	737	89,923,548	122,013	1119	139,218,650	124,413
Locums	37	1,036,953	28,026	17	300,103	17,653	54	1,337,056	24,760
Total	865	125,669,485	145,283	1,138	173,272,733	152,261	2,003	298,942,219	149,247

¹ Data provided are 'date of service'.

² Includes only those ER3 Payments reported by the hospitals. This report will not balance with Table 4.6 as Table 4.7 requires individual physician information which was not available for some alternate funded arrangements.

³ Includes Palliative Care and Others.

Physician Services Fee-For-Service Payments¹
Number of Services² by Type of Service

	1998/99			1999/00			2000/01			2001/02			Percent Change		
	No. of Services	% of Total		No. of Services	% of Total		No. of Services	% of Total		No. of Services	% of Total		98/99	99/00	00/01 01/02
Consultations	448,719	6.6		450,224	6.3		446,171	6.2		436,854	6.1		2.6	0.3	(0.9) (2.1)
Office Visits	3,671,013	53.6		3,630,304	50.5		3,608,698	50.5		3,612,530	50.3		0.4	(1.1)	(0.6) 0.1
Home Visits	50,924	0.7		47,834	0.7		43,733	0.6		40,701	0.6		(11.2)	(6.1)	(8.6) (6.9)
Nursing Home Visits	88,955	1.3		88,176	1.2		83,588	1.2		82,836	1.2		3.4	(0.9)	(5.2) (0.9)
Hospital Visits	583,826	8.5		576,328	8.0		554,965	7.8		540,419	7.5		0.1	(1.3)	(3.7) (2.6)
Other Visits	366	<0.1		293	<0.1		183	<0.1		263	<0.1		(9.4)	(19.9)	(37.5) 43.7
Emergency & Out-Patient Dept. Visit	575,779	8.4		554,577	7.7		531,862	7.4		531,737	7.4		1.5	(3.7)	(4.1) (0.0)
Intensive/Critical Care	60,627	0.9		59,583	0.8		58,722	0.8		59,506	0.8		(3.6)	(1.7)	(1.4) 1.3
Psychiatric Services	151,981	2.2		144,006	2.0		136,911	1.9		132,765	1.8		(3.6)	(5.2)	(4.9) (3.0)
Subtotal	5,632,190	82.2		5,551,325	77.2		5,464,833	76.4		5,437,611	75.8		0.3	(1.4)	(1.6) (0.5)
Eye Examinations	35,324	0.5		36,907	0.5		38,776	0.5		42,745	0.6		4.3	4.5	5.1 10.2
Other Diagnostic & Therapeutic	766,744	11.2		664,388	9.2		669,730	9.4		688,906	9.6		(0.5)	(13.3)	0.8 2.9
Subtotal	802,068	11.7		701,295	9.8		708,506	9.9		731,651	10.2		(0.3)	(12.6)	1.0 3.3
Obstetrical Care	96,019	1.4		92,820	1.3		84,957	1.2		83,174	1.2		(4.8)	(3.3)	(8.5) (2.1)
Major Surgery	85,369	1.2		87,673	1.2		89,216	1.2		90,098	1.3		1.8	2.7	1.8 1.0
Minor Surgery	99,204	1.4		97,375	1.4		97,455	1.4		100,024	1.4		1.0	(1.8)	0.1 2.6
Surgical Assist	18,342	0.3		18,038	0.3		18,827	0.3		19,396	0.3		3.3	(1.7)	4.4 3.0
Anaesthesia	88,176	1.3		87,539	1.2		84,686	1.2		80,982	1.1		(0.2)	(0.7)	(3.3) (4.4)
Subtotal	291,091	4.3		290,625	4.0		290,184	4.1		290,500	4.0		(25.2)	(0.2)	(0.2) 0.1
All Other Services ³	27,608	0.4		551,613 ⁴	7.7		602,383	8.4		633,923	8.8		(6.1)	1,898.0	9.2 5.2
Total Fee-for-Service	6,848,976	100.0		7,187,678	100.0		7,150,863	100.0		7,176,859	100.0		0.2	4.9	(0.5) 0.4
Pay Patient ⁵	8,227			7,172			6,186			6,238			15.2	(12.8)	(13.7) 0.8
Grand Total	6,857,203			7,194,850			7,157,049			7,183,097			0.2	4.9	(0.5) 0.4

¹ Data provided are 'date of service'.² Service counts include Shadow Services.³ Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.⁴ In 1999/00 the following fees were introduced: Pap Smear Tray Fee, Provincial Immunization Injections and Immunization Tray Fee.⁵ Includes Out-of-Country and Quebec services for Nova Scotia residents.

Physician Services Fee-For-Service Payments¹
Amount Paid by Type of Service

	1998/99		1999/00		2000/01		2001/02		Percent Change		
	Amount Paid	% of Total	Amount Paid	% of Total	Amount Paid	% of Total	Amount Paid	% of Total	98/99	99/00	00/01 01/02
Consultations	31,162,875	14.8	29,180,677	13.5	29,138,000	13.2	28,316,177	12.8	3.6	(6.4)	(0.1) (2.8)
Office Visits	71,644,254	33.0	78,829,712	36.4	79,863,171	36.2	80,621,374	36.5	4.1	10.0	1.3 0.9
Home Visits	1,914,537	0.9	1,807,434	0.8	1,653,348	0.8	1,533,546	0.7	(9.2)	(5.6)	(8.5) (7.2)
Nursing Home Visits	1,763,844	0.8	1,777,214	0.8	1,712,562	0.8	1,716,250	0.8	0.0	0.8	(3.6) 0.2
Hospital Visits	9,481,815	4.4	12,458,369	5.7	12,252,591	5.6	11,909,419	5.4	(2.4)	31.4	(1.7) (2.8)
Other Visits	12,470	<0.1	11,817	<0.1	7,773	<0.1	11,155	<0.1	(3.9)	(5.2)	(34.2) 43.5
Emergency & Out-Patient Dept. Visit	3,805,818	1.8	3,287,688	1.5	3,136,559	1.4	2,922,149	1.3	(32.1)	(13.6)	(4.6) (6.8)
Intensive/Critical Care	4,823,584	2.2	4,210,531	1.9	4,302,148	2.0	4,417,261	2.0	(4.4)	(12.7)	2.2 2.7
Psychiatric Services	10,472,306	4.8	10,331,875	4.8	10,044,021	4.6	9,621,920	4.4	(1.2)	(1.3)	(2.8) (4.2)
Subtotal	135,081,503	62.3	141,895,316	65.4	142,110,171	64.5	141,069,250	63.8	1.0	5.0	0.2 (0.7)
Eye Examinations	1,276,537	0.6	1,349,468	0.6	1,473,533	0.7	1,630,236	0.7	7.9	5.7	9.2 10.6
Other Diagnostic & Therapeutic	21,283,235	9.8	17,177,309	7.9	18,109,889	8.2	18,694,518	8.5	1.2	(19.3)	5.4 3.2
Subtotal	22,559,772	10.4	18,526,777	8.5	19,583,421	8.9	20,324,754	9.2	1.5	(17.9)	5.7 3.8
Obstetrical Care	7,064,821	3.3	7,129,337	3.3	6,965,457	3.2	6,879,308	3.1	(0.3)	0.9	(2.3) (1.2)
Major Surgery	25,994,248	12.0	26,968,215	12.4	28,511,188	12.9	29,081,424	13.2	7.0	3.7	5.7 2.0
Minor Surgery	3,400,416	1.6	3,384,876	1.6	3,536,601	1.6	3,602,664	1.6	1.1	(0.5)	4.5 1.9
Surgical Assist	1,760,834	0.8	1,992,259	0.9	2,489,493	1.1	2,575,634	1.2	9.0	13.1	25.0 3.5
Anaesthesia	12,218,656	5.6	11,532,020	5.3	11,234,730	5.1	11,259,307	5.1	(6.1)	(5.6)	(2.6) 0.2
Subtotal	43,374,154	20.0	43,877,370	20.2	45,772,012	20.8	46,519,029	21.0	2.5	1.2	4.3 1.6
All Other Services ²	2,192,182	1.0	5,408,941 ³	2.5	5,968,861	2.7	6,340,760	2.9	4.4	146.7	10.4 6.2
Total Fee-for-Service	210,272,432	100.0	216,837,742	100.0	220,399,923	100.0	221,133,101	100.0	1.3	3.1	1.6 0.3
Pay Patient ⁴	333,304		305,506		248,061		308,923		20.8	(8.3)	(18.8) 24.5
Grand Total	210,605,736		217,143,248		220,647,984		221,442,024		1.4	3.1	1.6 0.4

¹ Data provided are 'date of service'.² Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.³ In 1999/00 the following fees were introduced: Pap Smear Tray Fee, Provincial Immunization Injections and Immunization Tray Fee.⁴ Includes Out-of-Country and Quebec services for Nova Scotia residents.

Nova Scotia Department of Health - Table 4.10

Physicians Services Fee-For-Service Payments¹
Services Per 1,000 Insured Persons²

	Number of Services ³ Per 1,000 Insured					Percent Change			
	1997/98	1998/99	1999/00	2000/01	2001/02	1998/99	1999/00	2000/01	2001/02
Consultations	468	480	479	474	465	2.6	(0.2)	(1.0)	(1.8)
Office Visits	3,912	3,928	3,863	3,835	3,849	0.4	(1.7)	(0.7)	0.4
Home Visits	61	54	51	46	43	(10.7)	(6.6)	(8.7)	(6.7)
Nursing Home Visits	99	95	94	89	88	(3.9)	(1.4)	(5.3)	(0.6)
Hospital Visits	624	625	613	590	576	0.1	(1.8)	(3.8)	(2.4)
Other Visits	0.4	0.4	0.3	0.2	0	(9.4)	(20.4)	(37.6)	44.1
Emergency & Out-Patient Dept. Visit	607	616	590	565	567	1.5	(4.2)	(4.2)	0.2
Intensive/Critical Care	67	65	63	62	63	(3.2)	(2.3)	(1.6)	1.6
Psychiatric Services	169	163	153	145	141	(3.8)	(5.8)	(5.0)	(2.8)
Subtotal	6,007	6,026	5,907	5,807	5,794	0.3	(2.0)	(1.7)	(0.2)
Eye Examinations	36	38	39	41	46	5.0	3.9	4.9	10.5
Other Diagnostic & Therapeutic	824	820	707	712	734	(0.4)	(13.8)	0.7	3.1
Subtotal	860	858	746	753	780	(0.2)	(13.0)	0.9	3.5
Obstetrical Care	108	103	99	90	89	(4.9)	(3.9)	(8.6)	(1.8)
Major Surgery	90	91	93	95	96	1.5	2.1	1.6	1.3
Minor Surgery	105	106	104	104	107	1.1	(2.4)	(0.0)	2.9
Surgical Assist	19	20	19	20	21	3.3	(2.2)	4.2	3.3
Anaesthesia	95	94	93	90	86	(0.7)	(1.3)	(3.4)	(4.1)
Subtotal	309	311	309	308	310	0.8	(0.7)	(0.3)	0.4
All Other Services ⁴	31	30	587 ⁵	640	675	(4.7)	1,887.0	9.1	5.5
TOTAL ⁶	7,315	7,328	7,648	7,599	7,647	0.2	4.4	(0.6)	0.6

¹ Data provided are 'date of service'.

² Insured population from Statistics Canada new estimates, as of July 1st of each year, include Armed Forces and RCMP personnel.

³ Service counts include Shadow Services.

⁴ Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management

⁵ In 1999/00 the following fees were introduced: Pap Smear Tray Fee, Provincial Immunization Injections and Immunization Tray Fee.

⁶ Columns may not add to totals and subtotals due to rounding.

Physician Services Fee-For-Service Payments¹
Amount Paid Per 1,000 Insured Persons²

	Amount Paid Per 1,000 Insured					Percent Change		
	1997/98	1998/99	1999/00	2000/01	2000/01	1998/99	1999/00	2000/01 2001/02
Consultations	32,184	33,237	31,050	30,965	30,259	3.3	(6.6)	(0.3) (2.3)
Office Visits	73,653	76,412	83,879	84,871	86,152	3.7	9.8	1.2 1.5
Home Visits	2,257	2,042	1,923	1,757	1,639	(9.5)	(5.8)	(8.6) (6.7)
Nursing Home Visits	1,887	1,881	1,891	1,820	1,834	(0.3)	0.5	(3.8) 0.8
Hospital Visits	10,396	10,113	13,256	13,021	12,726	(2.7)	31.1	(1.8) (2.3)
Other Visits	14	13	13	8	12	(7.1)	(3.3)	(34.3) 44.3
Emergency & Out-Patient Dept. Visit	5,999	4,059	3,498	3,333	3,123	(32.3)	(13.8)	(4.7) (6.3)
Intensive/Critical Care	5,399	5,145	4,480	4,572	4,720	(4.7)	(12.9)	2.0 3.2
Psychiatric Services	11,344	11,169	10,994	10,674	10,282	(1.5)	(1.6)	(2.9) (3.7)
Subtotal	143,132	144,072	150,985	151,020	150,747	0.7	4.8	0.0 (0.2)
Eye Examinations	1,266	1,361	1,436	1,566	1,742	7.5	5.5	9.0 11.2
Other Diagnostic & Therapeutic	22,506	22,700	18,278	19,245	19,977	0.9	(19.5)	5.3 3.8
Subtotal	23,771	24,061	19,714	20,811	21,719	1.2	(18.1)	5.6 4.4
Obstetrical Care	7,584	7,535	7,586	7,402	7,351	(0.6)	0.7	(2.4) (0.7)
Major Surgery	25,997	27,724	28,696	30,299	31,077	6.6	3.5	5.6 2.6
Minor Surgery	3,599	3,627	3,602	3,758	3,850	0.8	(0.7)	4.3 2.4
Surgical Assist	1,729	1,878	2,120	2,646	2,752	8.6	12.9	24.8 4.0
Anaesthesia	13,922	13,032	12,271	11,939	12,032	(6.4)	(5.8)	(2.7) 0.8
Subtotal	45,246	46,261	46,688	48,642	49,710	2.2	0.9	4.2 2.2
All Other Services ³	2,246	2,338	5,755 ⁴	6,343	6,776	4.1	146.2	10.2 6.8
TOTAL⁵	221,980	224,267	230,728	234,219	236,304	1.0	2.9	1.5 0.9

¹ Data provided are 'date of service'.² Insured population from Statistics Canada new estimates, as of July 1st of each year, include Armed Forces and RCMP personnel.³ Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.⁴ In 1999/00 the following fees were introduced: Pap Smear Tray Fee, Provincial Immunization Injections and Immunization Tray Fee.⁵ Columns may not add to totals and subtotals due to rounding.

**Fee-For-Service Expenditure¹ Per Insured Person
By Age Group and Sex
Fiscal 2001/02**

Age Group	Insured ² Population	Expenditure Per Insured		
		Male	Female	Total
0 - 4	48,300	161.02	147.98	154.41
5 - 9	56,800	87.78	77.72	82.84
10 - 14	63,000	67.16	64.41	65.63
15 - 19	64,200	72.75	127.03	98.66
20 - 24	62,600	64.28	202.19	132.69
25 - 29	62,300	69.93	259.01	165.75
30 - 34	65,800	90.85	279.56	186.63
35 - 39	78,700	108.36	234.60	171.70
40 - 44	79,900	137.04	230.01	183.99
45 - 49	73,100	174.22	254.19	214.32
50 - 54	68,200	219.36	282.42	250.53
55 - 59	52,400	291.89	328.00	309.70
60 - 64	41,400	368.10	360.22	365.39
65 - 69	35,700	497.55	460.20	478.20
70 - 74	30,600	598.78	540.90	569.75
75+	59,600	736.64	624.42	678.37
Total	942,700^{3.00}	195.73	271.75	234.57

¹ Data provided are 'date of service'.

² Insured population from Statistics Canada new estimates, as of July 1, 2001, include Armed Forces and R.C.M.P. personnel.

³ Column does not add to total due to rounding.

Fee-for-Service Payments for Physicians' Services¹
Expenditure Per Insured Person by District Health Authority of Patient Residence
Fiscal 2001/02

District Health Authority of Patient Residence	Persons Insured ²	Expenditure Per Insured Person		
		General Practitioners	Specialists	Total
1 - South Shore	61,800	126.63	117.31	\$243.93
2 - South West Nova	65,100	105.29	120.55	225.84
3 - Annapolis Valley	84,200	114.16	117.69	231.85
4 - Colchester East Hants	73,300	98.27	121.46	219.73
5 - Cumberland	33,600	102.14	112.78	214.91
6 - Pictou County	49,500	108.99	123.55	232.54
7 - Guysborough Antigonish Strait	48,600	94.88	126.53	221.41
8 - Cape Breton	135,100	112.79	166.91	279.70
9 - Capital	391,400	107.35	116.92	224.27
TOTAL	942,700³	108.78⁴	125.80⁴	\$234.57⁵

¹ Data provided are 'date of service'.² Insured Population from Statistics Canada new estimates, as of July 1, 2000, include Armed Forces and RCMP personnel.³ Column does not add to total due to rounding.⁴ Excludes an 'Unknown' amount which cannot be broken out by DHA/specialty.⁵ Includes the 'Unknown' amount of \$668,846.22.

**Fee-for-Service Payments for Physicians' Services'
Utilization Data and Expenditure Per Patient
by District Health Authority of Patient Residence
Fiscal 2001/02**

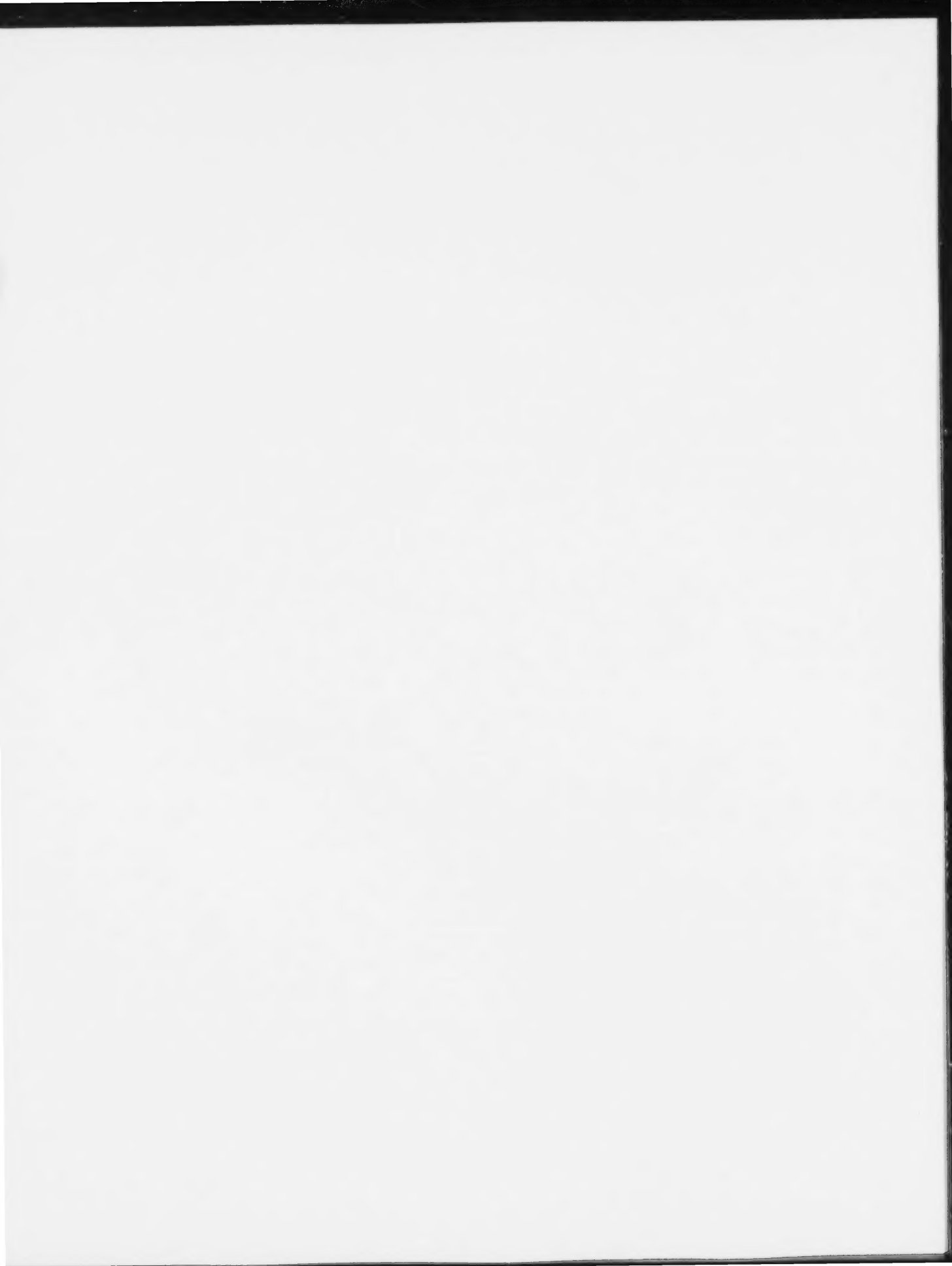
District Health Authority of Patient Residence	Number of Persons Insured ²	Number of Beneficiaries	Utilization Rate	Expenditure Per Beneficiary
1 - South Shore	61,800	49,658	80.4	303.58
2 - South West Nova	65,100	51,712	79.4	284.30
3 - Annapolis Valley	84,200	67,279	79.9	290.15
4 - Colchester East Hants	73,300	57,225	78.1	281.45
5 - Cumberland	33,600	25,099	74.7	287.70
6 - Pictou County	49,500	38,680	78.1	297.59
7 - Guysborough Antigonish Strait	48,600	37,185	76.5	289.36
8 - Cape Breton	135,100	108,885	80.6	347.04
9 - Capital	391,400	316,770	80.9	277.11
TOTAL	942,700³	749,392⁴	79.5	295.08

¹ Data provided are 'date of service'.

² Insured Population, from Statistics Canada newest estimates, as of July 1, 2000, include Armed Forces and RCMP.

³ Column does not add to total due to rounding.

⁴ Total is unique Fee-for-Service beneficiary count. Total by DHA does not add to unique total as some beneficiaries have an 'Unknown' DHA.

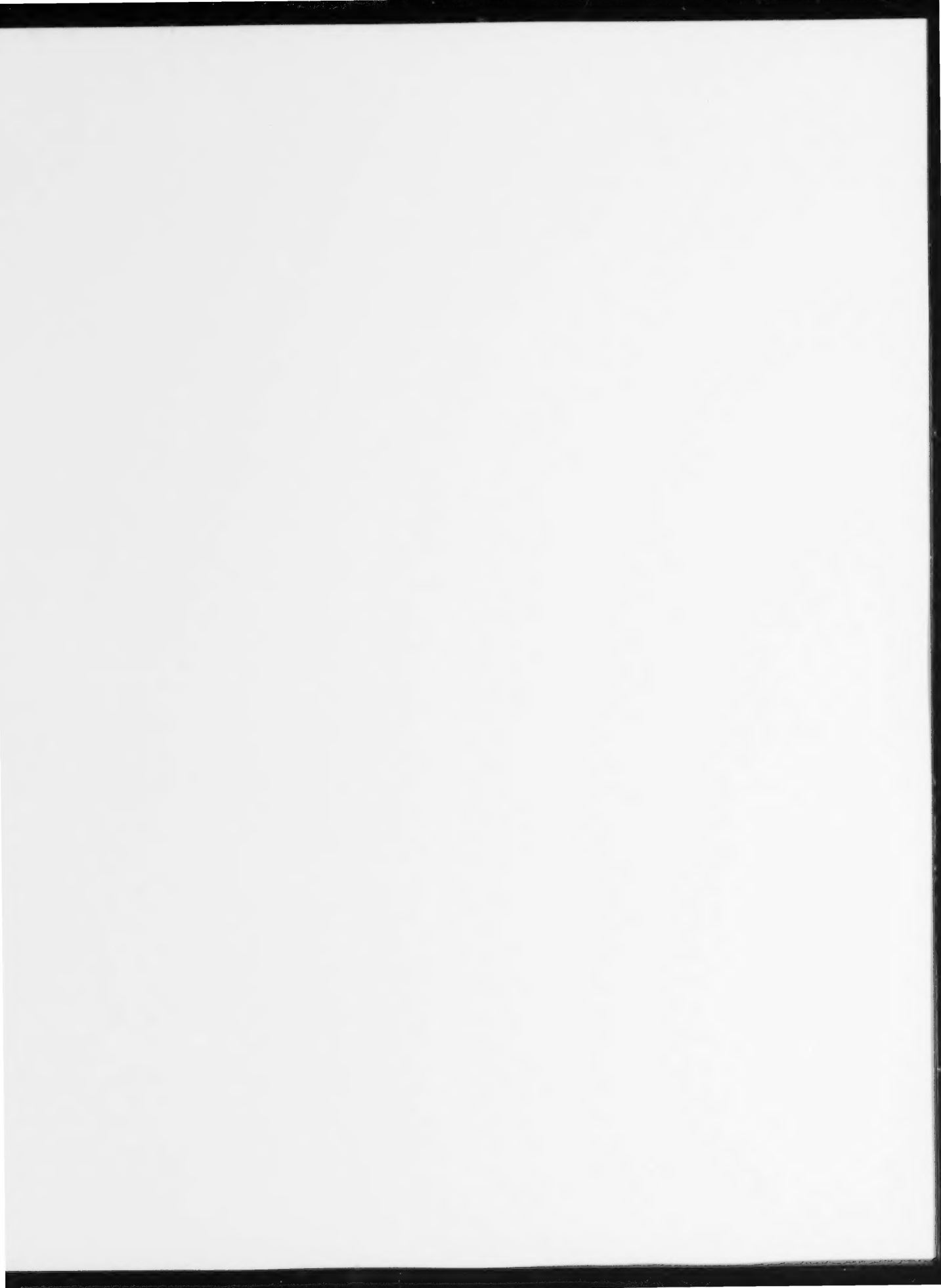




Health Economics

Section Five

Dental Programs



**Dental Programs
Payment Summary¹
Fiscal Years 1997/98 to 2001/02**

Payment Summary	1997/98 ²	1998/99 ²	1999/00 ²	2000/01 ^{2,3}	2001/02 ³	Percent Change		
Children's Oral Health Program	6,100,705	7,109,061	6,963,583	6,563,854	6,883,315	16.5	(2.0)	(5.7)
Dental Surgical Program ⁴	1,514,346	1,725,024	1,929,519	1,008,100	903,100	13.9	11.9	(47.8)
Out-of-province	965	1,622	819	0	0	68.1	(49.5)	(100.0)
IWK Dental Alternate Funded Program ⁵		217,073	468,363	495,271	458,873	n/a	n/a ⁵	5.7
Subtotal Dental Programs	7,616,016	9,052,780	9,362,284	8,067,225	8,245,288	18.9	3.4	(13.8)
Special Dental Programs								
Maxillofacial Prosthodontics	264,129	321,207	311,835	429,674	436,537	21.6	(2.9)	37.8
Cleft Palate ⁶	226,249	243,794	236,850	116,867	103,608	7.8	(2.8)	(50.7)
Mentally Challenged	63,998	89,766	86,985	93,370	101,671	40.3	(3.1)	7.3
Sir Frederick Fraser School	409	2	2	0	0	(99.5)	0.0	(100.0)
Special Considerations - Adult ⁶	36,573	41,131	40,231	14,443	21,984	12.5	(2.2)	(64.1)
Subtotal Special Dental Programs	591,358	695,899	675,903	654,353	663,800	17.7	(2.9)	(3.2)
Total Dental Payments	8,207,374	9,748,680	10,038,187	8,721,579	8,909,087	18.8	3.0	(13.1)
								2.1

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data beginning in 1999/00 are 'date of service'

² Totals include Dental Retroactive payments.

³ Totals include Accounting Adjustments.

⁴ A reduction in 2000/01 was due to some services being deinsured.

⁵ IWK Dental Alternate Funding Program began January 1, 1999.

⁶ Many Cleft Palate & Special Considerations procedures are now provided under the IWK Dental Alternate Funded Program.

**Children's Oral Health Program
Utilization Summary^{1,2}**

Fiscal Years 1997/98 - 2001/02

Utilization Summary	1997/98 ³	1998/99 ³	1999/00 ³	2000/01 ⁴	2001/02 ⁴	Percent Change		
						1998/99	1999/00	2000/01 2001/02
Services Rendered	263,845	298,557	283,978	266,392	260,387	13.2	(4.9)	(6.2) (2.3)
Amount Paid	6,100,705	7,109,061	6,963,583	6,563,854	6,883,315	16.5	(2.0)	(5.7) 4.9
Persons Insured ⁵	117,400	115,300	111,800	108,500	105,100	(1.8)	(3.0)	(3.0) (3.1)
Beneficiaries ⁶	64,017	65,459	64,375	61,301	59,868	2.3	(1.7)	(4.8) (2.3)
Services Per Insured Person	2.2	2.6	2.5	2.5	2.5	15.2	(1.9)	(3.3) 0.9
Paid per Insured Person	51.97	61.66	62.29	60.50	65.49	18.7	1.0	(2.9) 8.3
Services Per Beneficiary	4.1	4.6	4.4	4.3	4.3	10.7	(3.3)	(1.5) 0.1
Paid Per Beneficiary	95.30	108.60	108.17	107.08	114.97	14.0	(0.4)	(1.0) 7.4

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data beginning in 1999/00 are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

³ Totals include Dental Retroactive payments.

⁴ Totals include accounting adjustments.

⁵ Insured population from Statistics Canada new estimates as of July 1st of each year.

⁶ Persons receiving insured services.

Nova Scotia Department of Health - Table 5.3

**Dental Surgical Program
Utilization Summary^{1,2}
Fiscal Years 1997/98 - 2001/02**

Utilization Summary	1997/98 ³	1998/99 ³	1999/00 ³	2000/01 ⁴	2001/02	Percent Change	
						1998/99	1999/00 2000/01 2001/02
Services Rendered	15,549	16,909	19,422	6,952	4,407	8.7	14.9 (64.2) (36.6)
Amount Paid	1,514,346	1,725,024	1,929,519	1,008,100 ⁵	903,100	13.9	11.9 (47.8) (10.4)
Persons Insured ⁶	934,800	934,600	939,800	941,000	942,700	(0.0)	0.6 0.1 0.2
Beneficiaries ⁷	8,655	9,224	9,664	3,456	1,501	6.6	4.8 (64.2) (56.6)
Services Per Insured Person	0.02	0.02	0.02	0.01	<0.01	8.8	14.2 (64.3) (36.7)
Paid per Insured Person	1.62	1.85	2.05	1.07	0.96	13.9	11.2 (47.8) (10.6)
Services Per Beneficiary	1.8	1.8	2.0	2.0	2.9	2.0	9.6 0.1 46.0
Paid Per Beneficiary	174.97	187.01	199.66	291.70	601.67	6.9	6.8 46.1 106.3

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data beginning in 1999/00 are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

³ Totals include Dental Retroactive payments.

⁴ Totals include accounting adjustments.

⁵ Reduction in amount paid due to some services being deinsured.

⁶ Insured population from Statistics Canada new estimates, as of July 1st of each year, includes Armed Forces and RCMP personnel.

⁷ Persons receiving insured services.

**IWK Dental Alternate Funded Program
Utilization Summary^{1,2}
Fiscal Years 2000/01 to 2001/02**

Utilization Summary	2000/01	2001/02	Percent Change 2001/02
Services Rendered	5,960	6,391	7.2
Amount Paid	495,271	458,873	(7.3)
Beneficiaries³	914	1,133	24.0
Services Per Beneficiary	6.5	5.6	(13.2)
Paid Per Beneficiary	\$541.87	\$405.01	(25.3)
Services by Program			
Children's Oral Health	5,035	5,307	5.4
Cleft Palate	525	653	24.4
Mentally Challenged	338	329	(2.7)
Dental Surgery	22	90	309.1
Special Considerations	40	12	(70.0)

¹ Data provided are 'date of service'.² Includes services from the IWK Dental Alternate Funded Program only.³ Persons receiving insured services.

Nova Scotia Department of Health - Table 5.5
Special Dental Program - Maxillofacial Prosthodontics
Utilization Summary^{1,2}
Fiscal Years 1997/98 - 2001/02

Utilization Summary	1997/98 ³	1998/99 ³	1999/00 ³	2000/01 ⁴	2001/02 ⁴	Percent Change		
						1998/99	1999/00	2000/01
Services Rendered	1,366	1,549	1,622	1,626	1,987	13.4	4.7	0.2
Amount Paid	264,129	321,207	368,316	429,674	436,537	21.6	14.7	16.7
Beneficiaries ⁵	425	634	583	484	597	49.2	(8.0)	(17.0)
Services Per Beneficiary	3.2	2.4	2.8	3.4	3.3	(24.0)	13.9	20.8
Paid Per Beneficiary	621.48	506.64	631.76	887.76	731.22	(18.5)	24.7	40.5

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data beginning in 1999/00 are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

³ Totals include Dental Retroactive payments.

⁴ Totals include accounting adjustments.

⁵ Persons receiving insured services.

Nova Scotia Department of Health - Table 5.7

Utilization Summary		1997/98 ³ 1998/99 ³ 1999/00 ³ 2000/01 ⁴ 2001/02 ⁴					Percent Change			
Services Rendered		1,368	1,564	1,469	1,419	1,578	14.3	(6.1)	(3.4)	11.2
Amount Paid		63,998	89,766	85,341	93,370	101,671	40.3	(4.9)	9.4	8.9
Beneficiaries ⁵		192	196	210	200	202	2.1	7.1	(4.8)	1.0
Services Per Beneficiary		7.1	8.0	7.0	7.1	7.8	12.0	(12.3)	1.4	10.1
Paid Per Beneficiary		333.32	457.99	406.39	466.85	503.32	37.4	(11.3)	14.9	7.8

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data beginning in 1999/00 are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded

Program services.

³ Totals include Dental Retroactive payments.

⁴ Totals include accounting adjustments.

⁵ Persons receiving insured services.

Nova Scotia Department of Health - Table 5.8

Special Dental Program - Special Considerations

Utilization Summary^{1,2}

Fiscal Years 1997/98 - 2001/02

Utilization Summary	1997/98 ³	1998/99 ³	1999/00 ³	2000/01 ⁴	2001/02 ⁴	Percent Change		
						1998/99	1999/00	2000/01
Services Rendered	222	260	204	77	155	17.1	(21.5)	(62.3)
Amount Paid	36,573	41,131	54,217	14,443 ⁵	21,984	12.5	31.8	(73.4)
Beneficiaries ⁶	27	31	38	21	27	14.8	22.6	(44.7)
Services Per Beneficiary	8.2	8.4	5.4	3.7	5.7	2.0	(36.0)	(31.7)
Paid Per Beneficiary	1,354.56	1,326.81	1,426.76	687.77	814.20	(2.0)	7.5	(51.8)

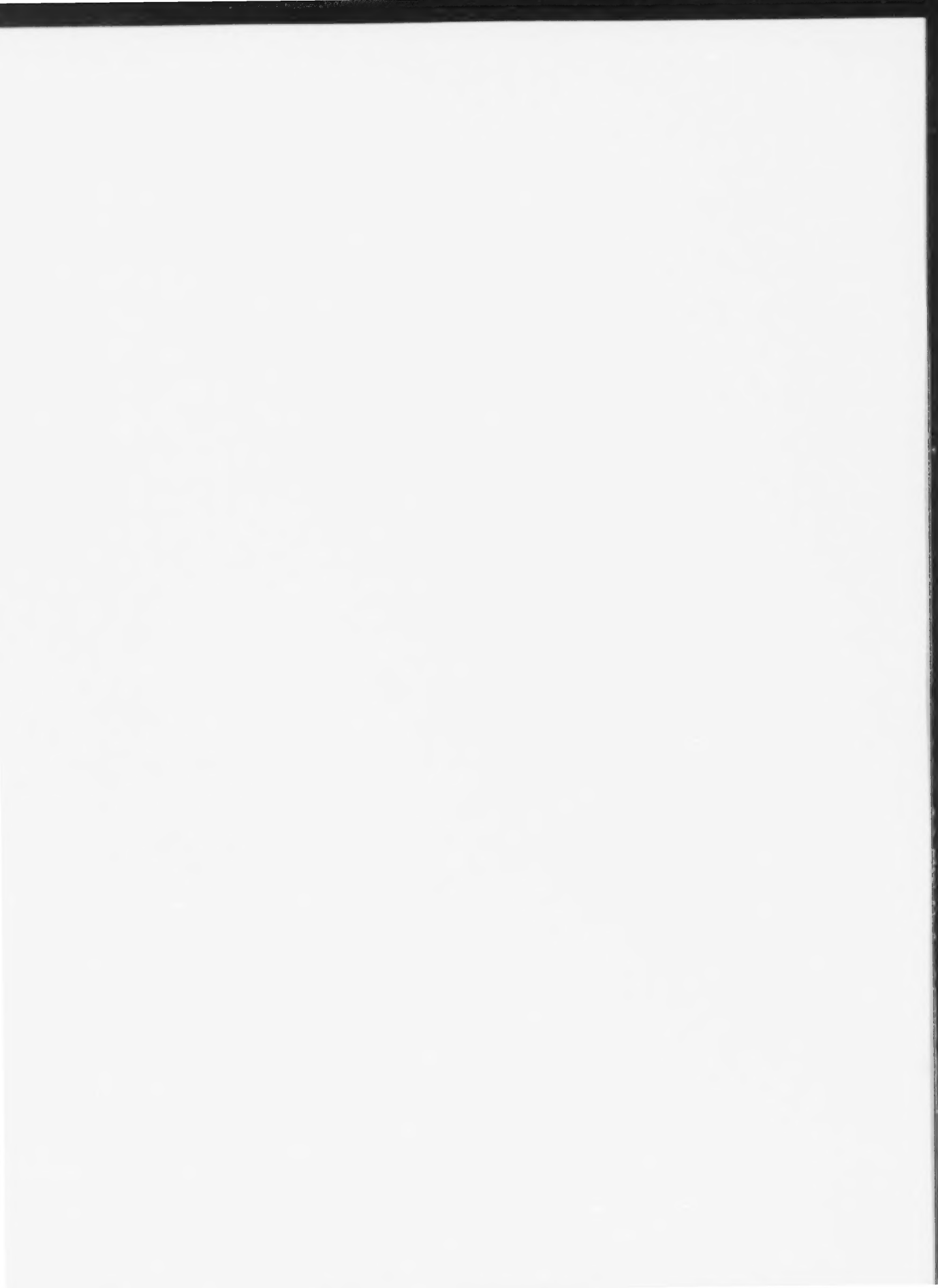
- ¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data beginning in 1999/00 are 'date of service'.
- ² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.
- ³ Totals include Dental Retroactive payments.
- ⁴ Totals include accounting adjustments.
- ⁵ Decrease due to many procedures now provided under the IWK Dental Alternate Funded Program.
- ⁶ Persons receiving insured services.



Health Economics

Section Six

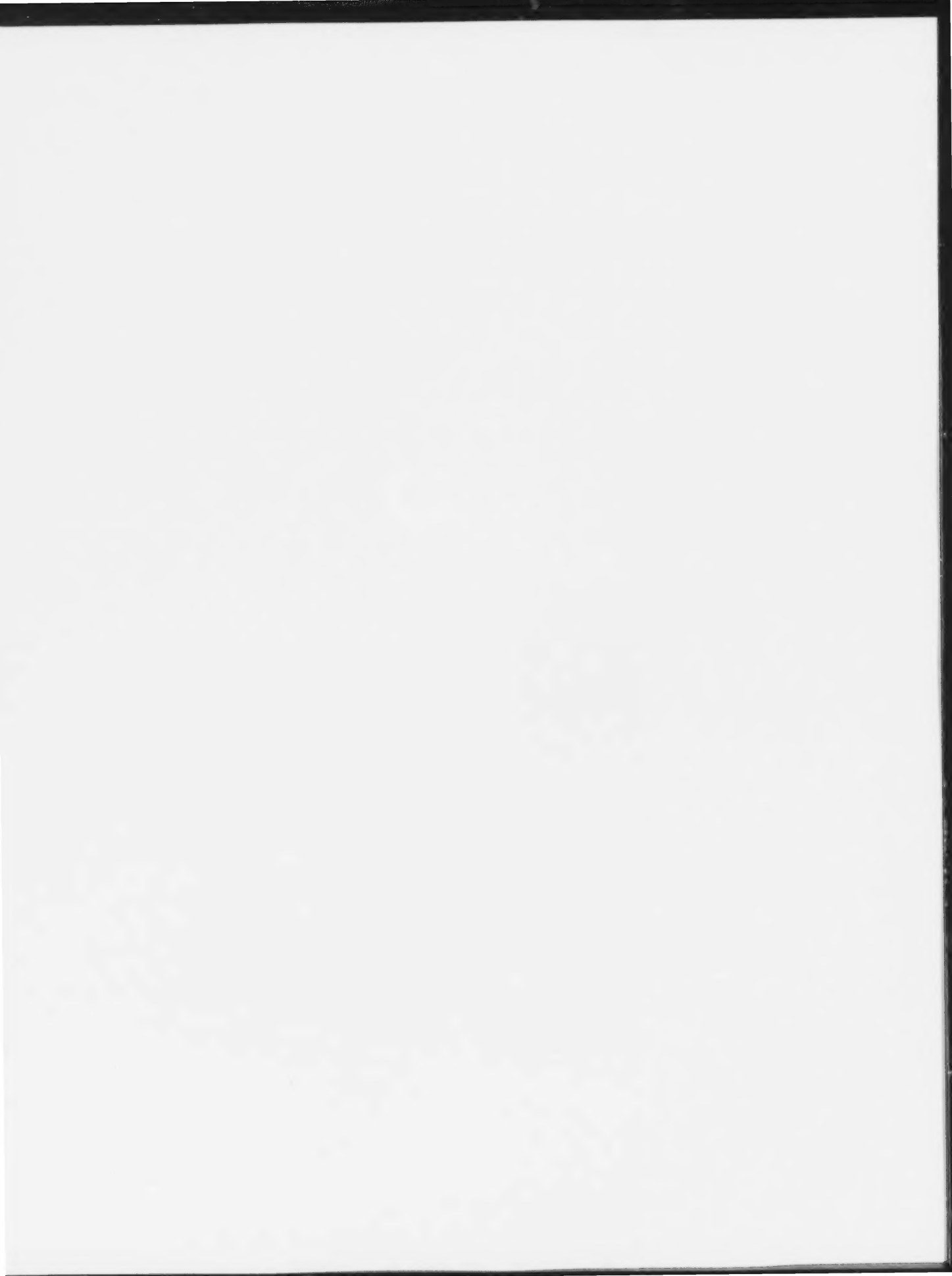
Optometric Services



Optometric Services
Payment and Utilization Summary¹
Fiscal Years 1997/98 to 2001/02

Payment Summary	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
						98/99	99/00	00/01
Fee-for-Service Payments	1,481,070	1,740,844	1,869,203	2,071,465	2,180,877	17.5	7.4	10.8
Pay Patient	36	134	0	0	21	272.9	(100.0)	n/a
Total	1,481,106	1,740,978	1,869,203	2,071,465	2,180,898	17.5	7.4	10.8
Utilization Summary								
Services Rendered	46,555	52,288	54,850	59,302	62,622	12.3	4.9	8.1
Persons Insured ²	934,800	934,600	939,800	941,000	942,700	(0.0)	0.6	0.1
Persons Receiving Services (Beneficiaries)	44,199	48,904	52,354	55,603	57,942	10.6	7.1	6.2
Percentage of Persons Insured	4.7	5.2	5.6	5.9	6.1	10.7	6.5	6.1
Services per 1,000 Insured	50	56	58	63	66	12.3	4.3	8.0
Expenditure per 1,000 Insured	1,584	1,863	1,989	2,201	2,313	17.6	6.8	10.7
Services per 1,000 Beneficiaries	1,053	1,069	1,048	1,067	1,081	1.5	(2.0)	1.8
Expenditure per 1,000 Beneficiaries	33,510	35,600	35,703	37,255	37,639	6.2	0.3	4.3

¹ Data provided are 'date of service'.² Insured population from Statistics Canada's newest estimates, as of July 1st of each year, include Armed Forces and RCMP personnel.





Health Economics

Section Seven

Prosthetic Programs



**Prosthetic Programs
Payment Summary
Fiscal Years 1997/98 to 2001/02**

Payment Summary	1997/98 ¹	1998/99 ²	1999/00 ²	2000/01 ²	2001/02 ²	Percent Change		
						1998/99	1999/00	2000/01
Breast	n/a	136,074	141,101	143,327	159,490	n/a	3.7	1.6
Limb	n/a	821,498	689,208	606,532	801,604	n/a	(16.1)	(12.0)
Ocular	n/a	63,394	54,704	58,099	85,082	n/a	(13.7)	6.2
Exceptional Considerations	n/a	240	0	17,189	12,836	n/a	n/a	n/a
Total Prosthetic Programs Payments	1,271,845	1,021,206	885,014	825,147	1,059,012	(19.7)	(13.3)	(6.8)
								28.3

¹ Only total program 'date of payment' data available for 1997/98.

² Data provided are 'date of service'.

**Prosthetic Programs - Breast Prostheses
Utilization Summary¹**

Fiscal Years 1998/99 to 2001/02

Utilization Summary	Percent Change			
	1998/99	1999/00	2000/01	2001/02
Services Rendered	791	812	851	887
Amount Paid	136,074	141,101	143,327	159,490
Persons Receiving Insured Services (Beneficiaries)	770	780	822	847
Paid Per Service	172.03	173.77	168.42	179.81
Services Per Beneficiary	1.0	1.0	1.0	1.0
Paid Per Beneficiary	176.72	180.90	174.36	188.30

¹ Data provided are 'date of service'.

Nova Scotia Department of Health - Table 7.3

**Prosthetic Programs - Limb Prostheses
Utilization Summary¹
Fiscal Years 1998/99 to 2001/02**

Utilization Summary	1998/99				1999/00				2000/01				2001/02				Percent Change			
Services Rendered					1,144			979			957			1,003			(14.4)	(2.2)	4.8	
Amount Paid					821,498			689,208			606,532			801,604			(16.1)	(12.0)	32.2	
Persons Receiving Insured Services (Beneficiaries)					446			370			399			410			(17.0)	7.8	2.8	
Paid Per Service					718.09			703.99			633.78			799.21			(2.0)	(10.0)	26.1	
Services Per Beneficiary					2.6			2.6			2.4			2.4			3.2	(9.4)	2.0	
Paid Per Beneficiary					1,841.92			1,862.72			1,520.13			1,955.13			1.1	(18.4)	28.6	

¹ Data provided are 'date of service'.

**Prosthetic Programs - Ocular Prostheses
Utilization Summary¹**

Fiscal Years 1998/99 to 2001/02

Utilization Summary	1998/99				1999/00				2000/01				2001/02				Percent Change			
Services Rendered					428	344	385	550					(19.6)	11.9	42.9					
Amount Paid					63,394	54,704	58,099	85,082					(13.7)	6.2	46.4					
Persons Receiving Insured Services (Beneficiaries)					224	191	245	358					(14.7)	28.3	46.1					
Paid Per Service					148.12	159.02	150.91	154.69					7.4	(5.1)	2.5					
Services Per Beneficiary					1.9	1.8	1.6	1.5					(5.7)	(12.7)	-2.2					
Paid Per Beneficiary					283.01	286.41	237.14	237.66					1.2	(17.2)	0.2					

¹ Data provided are 'date of service'.



Health Economics

Section Eight

Pharmacare Programs



Nova Scotia Department of Health - Table 8.1

Seniors' Pharmacare Program¹
Payment and Utilization Summary
Fiscal Years 1997/98 to 2001/02

	1997/98	1998/99	1999/00 ²	2000/01 ²	2001/02 ²	Percent Change		
						1998/99	1999/00	2000/01 2001/02
Total Program Expenditure	88,838,890	99,487,640	103,931,150	105,181,591	113,074,294	12.0	4.5	1.2 7.5
Utilization Summary								
No. of Seniors ³	122,100	123,300	123,800	124,100	126,600	1.0	0.4	0.2 2.0
Insured Population ⁴	107,700	108,200	103,700	95,600	93,600	0.5	(4.2)	(7.8) (2.1)
Beneficiaries ⁵	101,331	102,006	101,827	91,943	91,626	0.7	(0.2)	(9.7) (0.3)
Percent of Insured Population	94.1	94.3	98.2	96.2	97.9	0.2	4.2	(2.1) 1.8
Prescriptions Dispensed	2,686,122	2,728,400	2,747,955	2,708,698	2,764,694	1.6	0.7	(1.4) 2.1
Prescriptions Per Insured	24.9	25.2	26.5	28.3	29.5	1.1	5.1	6.9 4.2
Expenditure Per Insured	824.87	919.48	1,002.23	1,100.23	1,208.06	11.5	9.0	9.8 9.8
Prescriptions Per Beneficiary	26.5	26.7	27.0	29.5	30.2	0.9	0.9	9.2 2.4
Expenditure Per Beneficiary	876.72	975.31	1,020.66	1,143.99	1,234.09	11.2	4.7	12.1 7.9

¹ Data provided are based on 'date of service'.

² Total Expenditure includes Total Professional Fee Paid, Total Drug Cost Paid, Total Upcharge Paid, Chedabucto, and Manual Nursing Homes. Financial adjustments for the Audited statement are not reflected in these statistical tables.

³ Audited expenditure for 97/98 - \$88,903,002; 98/99 - \$99,303,733; 99/00 - \$100,863,047; 00/01 - \$104,159,754; 01/02 - \$113,270,558

⁴ New estimate of insured persons 65 years & older from Statistics Canada as of July 1st each year.

⁵ Insured population is from the MSI Premium Billing system. Insurer of last resort was implemented October 1, 1999 affecting approximately 11,000 seniors. Therefore, for 1999/00 insured population was estimated.

⁶ In 1999/00 approximately 11,000 seniors would have been counted as beneficiaries prior to the October 1, 1999 implementation date of insurer of last resort.

Seniors' Pharmacare Program**Total Drug Utilization¹ by Age****Fiscal Year 2001/02**

Age Group	Beneficiaries	Number of Prescriptions	Drug Cost	Pharmacists' Fees ²	Total Drug Costs ³	Rx Per Beneficiary	Cost Per Beneficiary
65 - 69	17,861	405,620	14,534,819	3,538,133	18,072,953	23	1,011.87
70 - 74	22,266	622,366	22,133,766	5,582,019	27,715,784	28	1,244.76
75 - 79	19,195	600,483	20,351,435	5,458,245	25,809,680	31	1,344.60
80 - 84	15,283	511,365	15,944,056	4,657,806	20,601,863	33	1,348.02
85 - 89	10,281	371,773	9,945,261	3,367,908	13,313,169	36	1,294.93
90 - 94	4,980	187,962	4,280,679	1,685,780	5,966,459	38	1,198.08
95 - 99	1,476	55,029	1,058,670	489,089	1,547,759	37	1,048.62
100+	284	10,096	163,264	88,499	251,763	36	886.49
Manual Claims					42,681		
Total	91,626	2,764,694	88,411,951	24,867,488	113,322,111 ⁴	30	1,236.32 ⁵

¹ Data provided are based on 'date of service'.² Includes Professional Fee and Upcharge.³ Total excludes Accounting adjustments as age and gender distribution data are not available.⁴ Total includes manual claims for residents of Nursing Homes. Age/gender distribution data are not available for these Homes.⁵ Average cost per beneficiary excludes manual claims for Nursing Home residents as age/gender distribution data are not available.

Nova Scotia Department of Health - Table 8.3

Seniors' Pharmacare Program

Female Drug Utilization¹ by Age

Fiscal Year 2001/02

Age Group	Beneficiaries	Number of Prescriptions	Drug Cost	Pharmacists' Fees ²	Total Drug Costs	Rx Per Beneficiary	Cost Per Beneficiary
65 - 69	9,926	230,240	7,617,695	1,992,607	9,610,302	23	968.19
70 - 74	12,719	364,935	12,168,587	3,261,168	15,429,755	29	1,213.13
75 - 79	12,162	390,142	12,306,782	3,515,853	15,822,634	32	1,300.99
80 - 84	11,087	382,391	11,145,190	3,454,566	14,599,756	34	1,316.84
85 - 89	7,616	286,204	7,111,455	2,568,487	9,679,941	38	1,271.00
90 - 94	3,809	147,181	3,161,853	1,315,706	4,477,558	39	1,175.52
95 - 99	1,203	46,527	841,045	410,752	1,251,796	39	1,040.56
100+	255	9,050	139,037	79,758	218,794	35	858.02
Total	58,777	1,856,670	54,491,642	16,598,896	71,090,538³	32	1,209.50

Male Drug Utilization¹ by Age

Fiscal Year 2001/02

Age Group	Beneficiaries	Number of Prescriptions	Drug Cost	Pharmacists' Fees ²	Total Drug Costs	Rx Per Beneficiary	Cost Per Beneficiary
65 - 69	7,935	175,380	6,917,124	1,545,526	8,462,650	22	1,066.50
70 - 74	9,547	257,431	9,965,179	2,320,850	12,286,029	27	1,286.90
75 - 79	7,033	210,341	8,044,654	1,942,392	9,987,046	30	1,420.03
80 - 84	4,196	128,974	4,798,867	1,203,240	6,002,107	31	1,430.44
85 - 89	2,665	85,569	2,833,806	799,422	3,633,228	32	1,363.31
90 - 94	1,171	40,781	1,118,826	370,075	1,488,901	35	1,271.48
95 - 99	273	8,502	217,626	78,337	295,963	31	1,084.11
100+	29	1,046	24,227	8,741	32,968	36	1,136.84
Total	32,849	908,024	33,920,309	8,268,583	42,188,892³	28	1,284.33

¹ Data provided are based on 'date of service'.

² Includes Professional Fee and Upcharge.

³ Total excludes Accounting adjustments and manual claims for Nursing Homes as age and gender distribution data are not available.

Nova Scotia Department of Health - Table 8.4
Seniors' Pharmacare Program Utilization¹ by District Health Authority
Fiscal years 1999/00 to 2001/02

District Health Authority	Beneficiaries ²		Percent Change		Rx Count ³		Percent Change		Rx/Beneficiary	
	99/00	00/01	99/00	00/01	99/00	00/01	99/00	00/01	99/00	00/01
1 - South Shore	8,403	7,839	0.8	(6.7)	224,428	219,396	6.2	(2.2)	26.7	28.0
2 - South West Nova	8,830	8,332	0.9	(5.6)	275,046	275,882	7.7	0.3	31.1	33.1
3 - Annapolis Valley	9,501	8,307	0.4	(12.6)	245,410	234,695	1.4	(4.4)	25.8	28.3
4 - Colchester East Hants	7,482	6,910	2.1	(7.6)	183,303	182,824	6.9	(0.3)	24.5	26.5
5 - Cumberland	4,957	4,591	0.0	(7.4)	157,032	153,424	7.0	(2.3)	31.7	33.4
6 - Pictou County	6,163	5,809	(2.1)	(5.7)	191,199	187,715	3.8	(1.8)	31.0	32.3
7 - Guysborough Antigonish Strait	5,818	5,705	1.0	(1.9)	174,954	178,942	7.1	2.3	30.1	31.4
8 - Cape Breton	17,235	16,554	1.2	(4.0)	468,341	474,383	6.1	1.3	27.2	28.7
9 - Capital	33,702	28,256	0.4	(16.2)	820,468	794,627	(0.9)	(3.1)	24.3	28.1
Total	101,827⁴	91,943	(0.2)	(9.7)	2,747,955	2,708,696	0.7	(1.4)	27.0	29.5
									30.2	

¹ Data provided are based on 'date of service' and exclude Accounting adjustments and manual claims from Nursing Homes.

² Beneficiaries columns may not add to totals as residents may be counted in more than one District Health Authority.

³ Column totals do not agree with the Total due to missing DHAs in data.

⁴ In 1999/00 approximately 11,000 seniors would have been counted as beneficiaries prior to the October 1, 1999 implementation date of insurer of last resort.

Seniors' Pharmacare Program Utilization¹ by District Health Authority
Fiscal years 1999/00 to 2001/02

District Health Authority	Beneficiaries ²		Total Expenditure ³		Percent Change		Cost/Beneficiary	
	99/00	00/01	99/00	00/01	99/00	00/01	99/00	01/02
1 - South Shore	8,403	7,839	8,508,511	8,581,677	9.8	0.9	1,012.56	1,094.74
2 - South West Nova	8,830	8,332	9,459,516	9,712,192	11.6	2.7	1,071.29	1,165.65
3 - Annapolis Valley	9,501	8,307	9,054,806	8,937,171	4.2	(1.3)	953.04	1,075.86
4 - Colchester East Hants	7,482	6,910	7,344,381	7,484,067	13.3	1.9	981.61	1,083.08
5 - Cumberland	4,957	4,591	5,466,414	5,481,970	8.7	0.3	1,102.77	1,194.07
6 - Pictou County	6,163	5,809	7,017,338	7,113,480	6.7	1.4	1,138.62	1,224.56
7 - Guysborough Antigonish Strait	5,818	5,705	6,305,544	6,627,959	11.3	5.1	1,083.80	1,161.78
8 - Cape Breton	17,235	16,554	17,886,003	18,591,946	11.5	3.9	1,037.77	1,123.11
9 - Capital	33,702	28,256	32,531,133	31,864,635	2.6	(2.0)	965.26	1,127.71
Total	101,827⁴	91,943	103,854,339	104,665,049	4.4	0.8	1,019.91	1,138.37
							1,236.32	

¹ Data provided are based on 'date of service' and exclude Accounting adjustments and manual claims from Nursing Homes.

² Beneficiaries columns may not add to totals as residents may be counted in more than one District Health Authority.

³ Column totals do not agree with the Total due to missing DHAs in data.

⁴ In 1999/00 approximately 11,000 seniors would have been counted as beneficiaries prior to the October 1, 1999 implementation date of insurer of last resort.

Nova Scotia Department of Health - Table 8.6

Special Funding Assistance Programs¹ for Residents

Payment Summary

Fiscal Years 1997/98 to 2001/02

Payment Summary	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
						1998/99	1999/00	2000/01 2001/02
Cystic Fibrosis								
- drugs	967,086	748,932	841,515	812,094	769,634	(22.6)	12.4	(3.5) (5.2)
- equipment & emergency	19,432	30,770	33,699	17,531	14,002	58.3	9.5	(48.0) (20.1)
Subtotal Cystic Fibrosis	986,518	779,702	875,214	829,625	783,635	(21.0)	12.2	(5.2) (5.5)
Diabetes Insipidus	109,083	108,631	114,210	120,673	107,861	(0.4)	5.1	5.7 (10.6)
Cancer	296,988	268,056	305,066	380,823	420,773	(9.7)	13.8	24.8 10.5
Growth Hormone Deficiency	341,982	305,805	375,576	364,600	499,680	(10.6)	22.8	(2.9) 37.0
Hemophilic Assistance Program	27,974	21,542	17,639	11,472	27,801	(23.0)	(18.1)	(35.0) 142.3
Other Drug Programs	n/a	68,482	171,999	194,815	300,448	n/a	151.2	13.3 54.2
Total Special Assistance Programs	1,762,545	1,552,218	1,859,704	1,902,009	2,140,198	(11.9)	19.8	2.3 12.5

¹ Data provided are based on 'date of service'.

**Special Funding Assistance for Residents with Cystic Fibrosis
Utilization Summary
Fiscal Years 1997/98 to 2001/02**

Program Expenditure ¹	Percent Change			
	1997/98	1998/99	1999/00	2000/01 2001/02
Drugs	967,086	748,932	841,515	812,094 769,634
Equipment	19,432	30,770	33,699	17,531 12,420
Total Program Expenditure	986,518	779,702	875,214	829,625 782,053
Utilization Summary				
Beneficiaries	157	159	154	154 148
Expenditure Per Beneficiary ²	6,159.78	4,710.26	5,464.38	5,273.34 5,200.23

¹ Data provided are based on 'date of service'.

² Per Beneficiary expenditure excludes dollar value for equipment.

Special Funding Assistance for Residents with Diabetes Insipidus
Utilization Summary
Fiscal Years 1997/98 to 2001/02

	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
Program Expenditure¹	109,083	108,631	114,210	120,673	107,861	1998/99	1999/00	2000/01 2001/02
						(0.4)	5.1	5.7 (10.6)
Utilization Summary								
Beneficiaries	63	64	69	70	63	1.6	7.8	1.4 (0.1)
Expenditure Per Beneficiary	1,731.48	1,697.36	1,655.22	1,723.90	1,712.08	(2.0)	(2.5)	4.1 (0.0)

¹ Data provided are based on 'date of service'.

**Special Funding Assistance for Residents with Cancer
Utilization Summary
Fiscal Years 1997/98 to 2001/02**

	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
Program Expenditure¹	296,988	268,056	305,066	380,823	420,773	1998/99	1999/00	2000/01 2001/02
						(9.7)	13.8	24.8 10.5
Utilization Summary								
Beneficiaries	279	348	366	368	305	24.7	5.2	0.5 (17.1)
Expenditure Per Beneficiary	1,064.47	770.28	833.51	1,034.85	1,379.58	(27.6)	8.2	24.2 33.3

¹ Data provided are based on 'date of service'.

Special Funding Assistance for Residents With Growth Hormone Deficiency
Utilization Summary
Fiscal Years 1997/98 to 2001/02

	1997/98	1998/99	1999/00	2000/01	2001/02	Percent Change		
Program Expenditure¹	341,982	305,805	375,576	364,600	499,680	1998/99	1999/00	2000/01 2001/02
						(10.6)	22.8	(2.9) 37.0
Utilization Summary								
Beneficiaries	33	33	35	36	32	0.0	6.1	2.9 (0.1)
Expenditure Per Beneficiary	10,363.09	9,266.82	10,730.74	10,127.77	15,615.01	(10.6)	15.8	(5.6) 0.5

¹ Data provided are based on 'date of service'.

